United Nations E/ICEF/2008/10

Economic and Social Council

Distr.: General
27 March 2008

Original: English

For discussion

United Nations Children's Fund
Executive Board
Annual session 2008
3-5 June 2008
Item 3 of the provisional agenda*

Annual report of the Executive Director: progress and achievements against the medium-term strategic plan

Summary

This report covers 2007, the second year of the UNICEF medium-term strategic plan (MTSP) for 2006-2009 (E/ICEF/2005/11). It focuses on progress in achieving the Millennium Development Goals and related commitments. It describes the key results registered in 2007 by the wide range of partnerships and alliances for children in each of the five focus areas of the MTSP. Trends in progress and performance against key indicators are further analysed in the accompanying Data Companion, posted on the UNICEF website.

The report was produced in conjunction with the UNICEF Annual Report to the Economic and Social Council (E/ICEF/2008/3) and Corr.1, which gives more detailed information on areas such as strategic partnerships and the coherence of operational activities for development. That report also provides many further examples of UNICEF contributions during 2007 in areas emphasized in the 2007 General Assembly resolution A/RES/62/2008 Triennial Comprehensive Policy Review (TCPR) of operational activities for development of the United Nations system. These include national capacity-building, South-South cooperation, gender equality and transition from relief to development.

Key issues in this report will be analysed in further depth in the report on the midterm review of the MTSP, to be presented to the Executive Board at its second regular session of 2008.

* E/ICEF/2008/9.

08-28636 (E) 210508

Introduction

1. Some important milestones in child survival were reached in the first two years of the current MTSP. For the first time in recent history, estimated annual under-five deaths fell below 10 million. The data for 2006, released in 2007, shows under-five mortality at 9.7 million, down from an estimated 13 million in 1990. This represents a 60 per cent reduction in the rate since 1960.

2. Measles deaths in Africa fell by 91 per cent between 2000 and 2006, from an estimated 396,000 to 36,000. The goal to cut measles deaths in Africa by 90 per cent by 2010 has been met four years early. The gains in Africa also helped to generate a 68-per-cent decline in measles deaths globally between 2000 and 2006.

3. In 2007, UNICEF engaged in a wide range of integrated, collaborative activities targeting results for children. These activities were undertaken with renewed urgency and with the benefit of increasingly solid information about which interventions work.

4. Among the new initiatives in which UNICEF is an active participant is a network of global health leaders that includes the World Health Organization (WHO), the United Nations Population Fund (UNFPA), the Joint United Nations Programme on HIV/AIDS (UNAIDS), the World Bank, the Global Fund to Fight AIDS, Tuberculosis and Maria, the Global Alliance for Vaccines and Immunization (GAVI) and the Gates Foundation. The group meets periodically to review progress, to assess current issues in global health and to discuss collective actions.

5. A new collaboration with Special Olympics International was launched at the 2007 Special Olympics World Summer Games in Shanghai, China, to advance the rights of children with intellectual disabilities. This complements advocacy work undertaken with Special Olympics, Save the Children and Operation Smile, following the 2006 adoption of the United Nations Convention on the Rights of Persons with Disabilities.

6. UNICEF provided support to water, sanitation and hygiene programmes in 90 countries in 2007, more than ever before, and the community-led "total sanitation" approach, where entire communities are motivated to find solutions, has emerged as a promising way of expanding coverage.

7. A number of new advocacy campaigns are beginning to show results, including advocacy for increased access for children to treatment for HIV. Substantial price decreases for antiretroviral treatment packs enabled UNICEF to increase the number of such packs delivered to those in need to over 5 million in 2007.

8. To sharpen its policy advocacy for children's rights, UNICEF has now identified priority areas of support for upstream policy work, including on child poverty and disparities. *The State of the World's Children* report for 2007 includes new indicators on child protection, reflecting advances in data collection and use across the whole range of activities in which UNICEF is engaged.

9. The strengthening of systems to document lessons learned and good practices continued, including the establishment in 2007 of a new database and website to store, share and facilitate documentation.

10. Key management indicators also showed positive trends and, for the third year in a row, the ratio of programme support costs to total regular resources was better than the MTSP target of 18.7 per cent.

11. In the Declaration that emerged from the December 2007 high-level plenary meeting on the follow-up to the 2002 General Assembly special session on children, United Nations Member States expressed their renewed commitment to build "a world fit for children", calling for "a collective sense of urgency" in pursuing the Millennium Development Goals. They recognized that:

"By giving high priority to the rights of children, to their survival and to their protection and development, we serve the best interest of all humanity".

12. This Declaration provided a fitting conclusion to 2007. It was underpinned by a comprehensive report on *Children and the Millennium Development Goals* issued by the Secretary-General, to which UNICEF contributed a wide range of evidence-based analysis and new data. This, in turn, was reinforced by the TCPR resolution in 2007 and by the Bali Roadmap.

13. Under the framework of its MTSP, UNICEF intensified its efforts to promote and support nationally owned, integrated programmes for education, health and nutrition, for clean water and sanitation, for child protection, and for HIV prevention, treatment and care.

14. The initiatives outlined in this report, and the health milestones that emerged in 2007, show that impressive results for children are possible. But with some 9.7 million children around the world still did not reaching their fifth birthday in 2006, there is no room for complacency.

15. The overarching goal of UNICEF throughout the reporting period is to engage all relevant actors — in the community, nationally and around the world — to unite to deliver the best possible results for children.

I. Status and trends against key result areas in the 2006-2009 plan

A. Focus area 1: Young child survival and development (Goals 1, 4, 6 and 7)

16. UNICEF continued to work intensively with partners to accelerate the scaling up of a well-defined, evidence-based and integrated package of low-cost, high-impact child survival interventions — including through support for intensifying communication with families and communities for improved health and nutrition practices; for strengthening the capacity of routine health services; and for Child Health Days, integrating the delivery of immunization with other health and nutrition interventions such as vitamin A, deworming, growth monitoring, distribution of insecticide-treated bed nets and health and nutrition education. The number of countries supporting Child Health Days rose from 25 in 2005 to 44 in 2007.

17. Major partners undertook their own efforts to strengthen common frameworks for child survival and development. The African Union held the Pan-African Forum on Children, in Cairo, to prepare a common contribution to the World Fit for

Children Plus 5 review, reaffirming the goals of *Africa Fit for Children* (2001) and called for clear accelerated child survival and development (ACSD) strategies and monitoring, as well as biannual reporting to review progress. In countries now using ACSD as their key strategic framework for reducing child mortality, the approach is helping to attract new funding and to strengthen planning, coordination and monitoring.

18. The year 2007 saw further strengthening of the knowledge and evidence base available to all partners. New articles published in *The Lancet*[1] reported that around 200 million children are not developing to their full potential because of poor health, nutrition and insufficient early stimulation, with poverty as an underlying cause. The articles provide state-of-the-art evidence for increased investment in promoting integrated health, nutrition and early learning programmes, especially for the most vulnerable.

19. The UNICEF Executive Director continued to chair the United Nations Standing Committee on Nutrition, mandated to promote cooperation among United Nations agencies and partner organizations in support of efforts to end malnutrition. The theme of the 2007 annual session, in Rome, was "Accelerating the reduction of maternal and child undernutrition". Good maternal and child nutrition is increasingly recognized as central to the success of integrated child survival and development interventions. A highly promising approach in situations of emergency and severe acute malnutrition is the use of ready-to-use therapeutic foods, including "Plumpy'nut®", a specially designed, balanced, nutritional supplement. UNICEF supported partners in designing programme strategies to use these foods and acted as a catalyst in widening their production in developing countries through the establishment of certified production facilities in Ethiopia, Malawi and Niger.

20. The report of the WHO Commission on Social Determinants of Health, "Early Child Development: A Powerful Equalizer", provided practical examples on how to reach families and communities through health systems, addressing issues of child survival, growth and development.

21. UNICEF continued to make key contributions to the governance and priority-setting of global initiatives, including the Global Alliance for Improved Nutrition, the Network for Sustained Elimination of Iodine Deficiency, the Flour Fortification Initiative and the Micronutrient Initiative. The strong partnership with WHO and the International Baby Food Action Network continued, especially around building capacity and technical support related to infant and young child feeding. Increased interest in this area has led to the involvement of many additional agencies, including the Global Alliance for Improved Nutrition and the Gates Foundation.

1. Key result area 1: Scale up high-impact health and nutrition interventions. Estimated 2007 programme assistance: $718.9 million[2]

22. UNICEF continued to support routine immunization systems and activities in 157 countries and territories classified as developing countries or economies in transition. Support was provided for policy and guideline development, logistics, social mobilization and supply procurement, and for a wide variety of capacity-building measures, such as training on safe immunization practices, vaccine management and surveillance.

23. UNICEF advocacy has been associated with significant increases in national budget allocations for routine immunization, for example in Armenia, Ecuador and Kenya. Notable increases in immunization rates were seen from 2005 to 2006 in countries that included Côte d'Ivoire, the Democratic People's Republic of Korea, Nepal, Niue, Panama, Papua New Guinea, the Republic of the Congo, Solomon Islands, Timor-Leste and Vanuatu.

24. In 2006, the latest year for which figures are available, global vaccination coverage trends continued to be positive, with coverage of the three doses of combined diphtheria/pertussis/tetanus (DPT3) vaccine estimated at 79 per cent. The number of countries reaching at least 90 per cent DPT3 coverage rose from 114 in 2005 to 115 in 2006. The greatest improvements occurred in sub-Saharan Africa where coverage rose from 52 per cent in 2000 to 72 per cent 2006.

25. Deaths due to measles have continued to fall. The largest percentage reduction in estimated measles mortality has occurred in sub-Saharan Africa, where the number of deaths from measles declined from an estimated 396,000 in 2000 to 36,000 in 2006. This region achieved, well before the target date of 2010, the United Nations goal of cutting measles deaths by 90 per cent. These gains helped to generate a strong decline in measles deaths worldwide, which fell from an estimated 757,000 to 242,000 in the period from 2000 to 2006. A high proportion of measles deaths continue to occur in India, which had a national measles immunization coverage of 59 per cent in 2006 (WHO/UNICEF estimate).

26. Progress was also made in maternal and neonatal tetanus (MNT) elimination. Vaccination coverage with at least two doses of tetanus toxoid vaccine or tetanus-diphtheria toxoid vaccine was estimated at 69 per cent in 2006, while an estimated 81 per cent of newborns were protected against neonatal tetanus through immunization, up from 79 per cent in 2005. In 2007, Egypt and Zambia were validated as MNT-free countries. Coverage rates increased in a number of countries through routine immunization systems and campaigns.

27. Wild polio virus cases declined from 1,997 in 2006 to 1,307 in 2007, due mostly to reduced cases in Nigeria. Polio transmission was restricted to geographically-limited areas in the four remaining polio-endemic countries (Afghanistan, India, Nigeria and Pakistan). More than 400 million children under age five in 27 countries were vaccinated multiple times against polio in these countries; in countries with outbreaks in 2007; and in high-risk areas elsewhere. Cases were cut by 45 per cent in Afghanistan, where more than 100,000 previously unreached children were vaccinated under a special peace agreement.

28. UNICEF helped national partners take informed decisions on the introduction of new vaccines. As of end-2006, 164 countries had introduced hepatitis B vaccine in routine immunization, while *Haemophilus influenzae* type B vaccine was introduced in 104 countries nationwide. In 2006, the Global Alliance for Vaccines and Immunization (GAVI) added two new vaccines to its portfolio: pneumococcal conjugate vaccine (for pneumonia reduction) and rotavirus vaccine (for diarrhoea reduction). UNICEF co-chaired the GAVI health system strengthening work, and assisted with the design and implementation of the GAVI co-financing policy.

29. The number of countries achieving and sustaining high vitamin A coverage levels continued to increase. In preliminary 2006 data, of 74 countries reporting on two-dose coverage, 35 attained at least 70 per cent coverage, compared to 26 in

2004. UNICEF supplied over 500 million capsules of vitamin A in 70 countries in 2007, while nine countries covered part or all of the cost of capsules from national budgets. Major national campaigns were conducted in Bangladesh, the Democratic Republic of the Congo, Ethiopia and Democratic People's Republic of Korea, in each case reaching over 10 million children. Vitamin A supplementation became more sustainable through greater integration into routine immunization systems and/or through the expanded use of fortified foods.

30. Increased global attention to malaria contributed to greater flows of resources, allowing scaling-up of interventions. UNICEF continued its support to countries for the distribution of insecticide-treated mosquito nets (ITNs) through integrated maternal and child health services. The use of ITNs in sub-Saharan Africa has significantly increased: 16 of 20 countries with trend data have reported at least a threefold increase in coverage since 2000.

31. However, the world is still falling short of agreed international targets. In 2007, UNICEF prioritized giving support to countries in their development of malaria-related proposals to the Global Fund to help ensure that resources are sustained. UNICEF significantly increased its procurement of ITNs, from around 7 million in 2004 to nearly 25 million, at a cost of $121 million in 2006, with a continuing focus on reaching pregnant women and children. In 2007, global net procurement continued to rise as Governments increased their direct purchases.

32. In 2007, UNICEF procured some $17 million worth of anti-malarial medicines, representing more than 30 million treatments. This procurement was for the more effective anti-malaria treatment of artemisinin-based combination therapies. Nearly all countries in sub-Saharan Africa have now changed their treatment policies to these highly effective medicines. UNICEF continued support to operational research in six countries on intermittent preventive treatment for malaria in infants, linked to routine immunization.

33. As a result of this scale-up in malaria interventions, routine monitoring data are beginning to show significant reductions in malaria morbidity and mortality in Africa.

34. Diarrhoeal diseases continue to account for some 1.8 million deaths a year among children under five. Most developing countries have adopted the new recommended policy on the use of zinc in the management of acute diarrhoea. This approach was scaled up in Bangladesh, India, Indonesia, Pakistan, Ethiopia, United Republic of Tanzania and elsewhere. UNICEF and WHO conducted six regional advocacy meetings on the new treatment guidelines. Cholera and acute watery diarrhoea morbidity and mortality were significantly reduced in Angola, Sierra Leone, eastern Democratic Republic of the Congo, Sudan and elsewhere.

35. UNICEF, WHO and other partners developed a Global Action Plan for the Prevention and Control of Pneumonia, in the context of a comprehensive child survival strategy, aiming to scale up integrated interventions. UNICEF and WHO also reviewed the community case management of pneumonia in 54 countries with high rates of child mortality; results will be published in 2008.

36. UNICEF was co-convener of the inter-agency technical team on HIV prevention in pregnant women, mothers and children. Efforts focused on scaling up prevention of mother-to-child transmission (PMTCT) and paediatric HIV care, support and treatment, through advocacy with national Governments to deliver on

the agreed goal of universal access to PMTCT. This resulted in greater political commitment and increased funding (see focus area 3).

37. UNICEF continued to address accident and injury prevention among children through support for awareness-raising, policy formulation, studies and the development of surveillance systems. Prevention campaigns were carried out in Cuba, El Salvador, Oman, South Africa and Viet Nam. UNICEF also supported countries in Asia and elsewhere with the gathering and use of evidence to strengthen their approaches and worked closely with WHO on the *World Report on Child Injury Prevention*.

38. By 2007, some 52 programme countries had included quantified targets for scaling up high impact health and nutrition interventions in their national budget or expenditure frameworks, compared to 42 in 2005. UNICEF, as a member of United Nations country teams, provided technical support to Governments in the review of national health plans and health sector performance, as well as in the development of medium-term expenditure frameworks for reaching the health-related Millennium Development Goals. Investment cases based on the latest data were used to develop the Catalytic Initiative proposal (see paragraph 35).

39. The latest maternal mortality data released in tandem with the 'Women Deliver' Conference, held in London in 2007, showed that Millennium Development Goal 5 is far from being reached. Preventing maternal deaths and improving maternal health will require greater attention to strengthening the health delivery system. Family planning services, use of skilled birth attendants, and access to emergency obstetric care when needed are crucial.

40. Major partners working on maternal and newborn health — UNFPA, WHO, the World Bank and UNICEF — have identified nine components that need to be delivered at scale. A new joint effort to support countries has been designed with a clearer definition of agency roles. UNICEF is investing to help to scale up birth planning and antenatal care, including PMTCT, improved home care practices along with post-natal visits in the community, and better access to treatment of newborn illnesses. Working with UNFPA and Columbia University, UNICEF is supporting improved access to emergency obstetric care. Initiatives in 2007 included a regional review of maternal health in South Asia, including lessons learned; support for emergency obstetric care assessments and the introduction of maternal death audits to improve quality of services in Eastern and Southern Africa; and support to First Ladies in West and Central Africa helping to place maternal health higher on national agendas.

41. In September 2007, UNICEF joined the Government of the United Kingdom, other global health agencies, donors and developing countries, to launch the International Health Partnership as part of a renewed global push to accelerate progress on the health-related Millennium Development Goals. Partners recognize that aid must be not only increased but better delivered. Partners have committed to more effective coordination of efforts and to work towards the creation of comprehensive national health plans.

42. This partnership complements the Catalytic Initiative, which aims to intensify efforts to achieve Goals 4 and 5 by strengthening the capacity of national systems to deliver a package of proven, high-impact, cost-effective interventions. The initiative

grew out of early work on ACSD, piloted with UNICEF support to 11 countries in West Africa. Approximately $350 million of new funding has been allocated.

43. These and other related initiatives, including the Global Business Plan and the Global Campaign for Health Millennium Development, were launched in 2007; UNICEF has helped to shape their development.

44. In July 2007, UNICEF hosted the first informal meeting of global health leaders from eight international organizations to discuss ways of strengthening collaboration to achieve better health outcomes in developing countries. The "H8" is a network that includes WHO, UNFPA, UNAIDS, the World Bank, the Global Fund, GAVI, the Gates Foundation and UNICEF. The group meets periodically to review progress made, to discuss current trends in global health and collective actions. The group has adopted the following approaches: to share ideas and keep each other informed of key strategic directions; to find opportunities to collaborate, based on complementarities; to identify and address gaps in collective efforts; to hold themselves accountable for doing everything possible to support achievement of the Millennium Development Goals, and to align their work and communications to achieve these ends. The following are examples of current activities: collaboration on promoting the health-related Millennium Development Goals at forums such as the G8; strengthening engagement with civil society and the private sector; ensuring stronger links between HIV and AIDS programmes and efforts to strengthen health systems; creating an inter-agency strategic information forum; and accelerating joint support to national efforts for reaching the health-related Goals in India.

2. Key result area 2: Improved family and community care practices that impact on young child survival, growth, and development.
Estimated 2007 programme assistance: $78.9 million

45. An estimated 143 million children under five in developing countries continue to suffer from undernutrition. The current annual average rate of reduction in underweight prevalence is 1.5 per cent, indicating that many developing countries will not meet the Millennium Development Goal 1 target on hunger unless programmes in key countries are scaled up rapidly and family practices improved. New data indicate that 12 additional countries are "on track" to reach this target, bringing the total to 58.[3]

46. Promising and significant recent improvements in exclusive breastfeeding rates have been seen in sub-Saharan Africa and in Central and Eastern Europe and the Commonwealth of Independent States, for which the latest estimates are 30 per cent and 19 per cent, respectively. In many of these latter countries, however, rates still remain very low and the International Code of Marketing of Breastmilk Substitutes is often not fully implemented. Building the capacity of UNICEF, government and non-governmental organization (NGO) staff in implementing the Code was a focus of some 30 countries during 2007. UNICEF also provided policy and planning support to regions and countries on infant and young child feeding, seeking greater integration with child survival initiatives. UNICEF support to the Ministry of Health in the Philippines, where the infant food industry challenged the country's improved infant food regulations by taking its case to the Supreme Court, is a "good practice example" of addressing practices detrimental to young children's nutrition.

47. In Asia, sub-Saharan Africa, and the Middle East and North Africa, UNICEF country activities were strengthened following several regional strategic planning meetings, including through integrating infant and young child feeding promotion with ongoing initiatives for child survival.

48. The continued support of UNICEF for food fortification ranged from global policy-setting to technical support, including for the fortification of flour, sugar, oil, and salt in more than 45 countries. This support is leading to significant public health gains: in South Africa, for example, preliminary results from a 2007 evaluation of fortification of wheat flour and maize meal with folic acid showed a remarkable decline in the incidence of neural tube defects.

49. Recent estimates indicate that more than two thirds of households in the developing world now consume adequate iodized salt, where approximately 84 million newborns are being protected from learning disabilities caused by iodine deficiency disorders. Thirty-four developing countries have attained universal salt iodization, up from 21 in 2000. Still, disparities persist. In Latin America and the Caribbean and the East Asia and the Pacific regions around 85 per cent of households consume iodized salt. These regions are followed by South Asia and Central and Eastern Europe and the Commonwealth of Independent States, where the figure is 50 per cent. UNICEF focused its cooperation on 16 priority countries with the highest number of unprotected infants and on major salt-producing countries.

50. In 2007, 10 countries introduced or continued initiatives to scale up paediatric multiple micronutrient powders ("Sprinkles") for children, particularly to address anaemia. Sprinkles are distributed either through monthly health service contacts or door to door by community health workers. In Peru, Sprinkles were distributed as part of the earthquake response, and UNICEF helped to pave the way for their adoption as a national public health intervention against chronic malnutrition.

51. The number of programme countries in which national development plans include targets for scaling up improved family and community care practices rose from 40 in 2005 to 63 in 2007. A community health worker training package on home-based newborn care was completed, including the promotion of breastfeeding and early stimulation. The first training of trainers was held in Africa, in conjunction with WHO. Malawi and Zambia held adaptation workshops in 2007 and are planning to scale up the home-based approach using community health workers.

52. There has also been an increase in the number of countries that have national programmes to promote good parenting, with specific strategies for reaching marginalized families and children — some 58 in 2007, up from 36 in 2005. In Romania, for example, a "parenting caravan" provides direct training and information on early child education in rural areas. UNICEF offices are supporting parents in many countries to acquire knowledge and skills to improve the development of their young children. Such programmes have achieved over 80 per cent coverage in most Caribbean countries as well as in Belarus and Thailand.

53. Despite this progress, the scaling up of successful community and family care practices remains a major challenge. The coverage of parenting — or equivalent family and community care — initiatives remains low overall, at roughly 29 per cent across programme countries. Lack of intersectoral coordination and limited delivery capacity at local levels are among the major constraints. UNICEF and

partners are evaluating parenting programmes to develop more systematic recommendations.

54. More effective communication for behavioural and social change is a pressing need for improved care for children. Several countries, including Iran, Kyrgyzstan, Moldova and Pakistan, used communication approaches to promote positive parenting for improved child care and prevention of abuse. Many other countries already operate community-based child centres, which offer tremendous opportunities for the delivery of convergent services and messages.

55. UNICEF and theWorld Food Programme (WFP) and other partners in the United Nations and among NGOs worked during 2007 to strengthen collaboration on child and maternal nutrition in the context of ACSD and the Ending Child Hunger and Undernutrition initiative. Formal agreements were established with key regional institutions, including the New Economic Partnership for Africa's Development, to move forward on the All Africa Nutrition Strategy, which includes micronutrient deficiency control, infant and young child feeding, and maternal nutrition.

3. Key result area 3: Increased access to, and use of, safe drinking water and basic sanitation.
Estimated 2007 programme assistance: $262.8 million

56. UNICEF provided support to water, sanitation and hygiene (WASH) programmes in 96 countries in 2007, the most ever. This includes activities in 56 of the 60 WASH priority countries with low water and sanitation coverage and high under-five mortality rates.

57. UNICEF is increasingly emphasizing the promotion of hand-washing with soap and hygiene in general as part of its WASH strategy. Countries where UNICEF is supporting large-scale national hygiene education programmes include Democratic Republic of the Congo, Guinea, Nigeria, Indonesia, Nepal, Sudan, Uganda and Zambia.

58. The community-led "total sanitation" approach, where entire communities are motivated to find sanitation solutions, has emerged as a promising way of expanding coverage. UNICEF support for demonstrating this approach extended from Asia to African regional training institutions and countries such as Eritrea, Nigeria and Zambia.

59. UNICEF-assisted programmes are also addressing the Millennium Development Goal target on water through the promotion of home water treatment. Examples include a new approach to water safety in Sri Lanka with private sector participation, and a comprehensive water safety planning programme in India. Home water treatment is also being promoted in African communities prone to cholera.

60. UNICEF provided support to arsenic mitigation in 12 countries in 2007 through a range of activities in planning, testing, mapping and technology development. More than 300,000 water sources were tested in South Asia, essentially completing the testing of existing water sources in affected countries. National arsenic mitigation strategic plans were developed by Cambodia and Pakistan, while Myanmar launched a comprehensive water quality system. In

Bangladesh, UNICEF also supported research on the social acceptability of arsenic mitigation technologies.

61. In Malawi, Mozambique, Nigeria and elsewhere in Africa, UNICEF significantly increased its support for large-scale WASH programmes, helping countries to accelerate progress towards Millennium Development Goal 7 targets and communities to gain access to clean water. In Eastern and Southern Africa, UNICEF assistance directly benefited some 1.5 million people through new or rehabilitated water systems. In Asia, UNICEF continued to support large-scale rural programmes and increasingly worked with partners to find ways to reach the growing numbers of poor urban children. In the Americas, UNICEF support to WASH programmes continued to focus on reaching marginalized populations, including indigenous children, while in Central and Eastern Europe and the Commonwealth of Independent States support focused on specific issues such as water quality.

62. UNICEF played a key role along with WHO and other partners in the global launch, development of advocacy tools, and planning at country level for the 2008 International Year of Sanitation, which will provide major opportunities for accelerating efforts and promoting sanitation issues and resource allocation in national development agendas.

63. With UNICEF support, more than 10,000 villages across South Asia became free of open defecation, and more than 15 million latrines were constructed, used by some 75 million people. This represents significant progress in a region where, in 2004, two out of three people were without improved sanitation. The UNICEF-supported total sanitation programme of the Government of India continued to make significant gains, with over 4,900 communities in 22 states receiving awards for achieving open defecation-free status in 2007.

64. Together with major partners, UNICEF is playing a growing "upstream" role in WASH, supporting policy reforms, strategy development and improved institutional and coordination mechanisms, drawing on long-term field experience. UNICEF also works with government partners to better integrate WASH goals into national planning structures: some 90 programme countries now incorporate explicit programmes and targets for achieving the Millennium Development Goal target in their national development plans, compared to 70 in 2005.

65. UNICEF assisted Afghanistan, Eritrea, Madagascar, Mozambique and Pakistan in the finalization of new WASH policies or legislation; and continued to support the development and refinement of WASH sector-wide approaches, including in Madagascar, Malawi, Sri Lanka and Zambia.

66. Among the challenges encountered were limitations in technical and managerial capacity among implementing partners, instability and humanitarian crises and the scarcity of assured longer-term funding.

67. Through the new WASH partnership of the Government of the Netherlands/UNICEF in Eastern and Southern Africa, the sustainability of services is being promoted through new approaches to strengthening community participation, support systems and the supply chain. These together would ensure that new systems will continue to be in use beyond 2015, verified through independent annual audits.

68. UNICEF chaired the "UN-Water" Task Force on Sanitation and participated in other partnerships such as the Public-Private Partnership on Hand-washing with Soap and the Project Champion partnership with Unilever, and in country initiatives such as the 'Washing with Soap' campaign in Indonesia.

69. During 2007, UNICEF and the African Development Bank agreed to collaborate more closely on WASH in schools, on sanitation and on household water management. In China, the World Bank, Department for International Development (DFID) of the United Kingdom and UNICEF are supporting a rural water supply and sanitation programme in two provinces. UNICEF continued its partnership with WHO and The Carter Center to support global eradication of drancunculiasis in the nine remaining endemic countries.

70. The Governments of the Netherlands and Norway committed major new funding for work in several countries in Africa and Asia. The Hilton Foundation provided new funding for dracunculiasis eradication in Africa, and American Express contributed to home water management in Africa. AusAID renewed its support to UNICEF for arsenic mitigation in Asia.

71. UNICEF worked with the Child Epidemiology Reference Group to strengthen the evidence base for water, sanitation and hygiene, through a partnership with the London School of Hygiene and Tropical Medicine. As part of intensified efforts in knowledge management, UNICEF provided evidence from field work to support national programme design, including some 17 national sector gender analyses. UNICEF also promoted the sharing of sharing of lessons learned. An example is the India WASH International Learning Exchange initiative, through which 81 participants from 20 countries undertook learning programmes on water quality; WASH in schools; rural sanitation and integrated water management.

4. Key result Area 4: In declared emergencies, every child is covered with life-saving interventions, in accordance with the UNICEF Core Commitments for Children in Emergencies (CCCs).
Estimated 2007 programme assistance: $179.2 million

72. UNICEF plays a major role in the humanitarian reform process, in particular in the development and implementation of the cluster approach in support of national emergency response. UNICEF leads the nutrition and WASH clusters and is a key partner in the health cluster, led by WHO. Through support to the development of tools to enhance emergency coordination and response, UNICEF contributed to predictability and coherence, as recognized by an independent evaluation of the cluster approach, coordinated by Office for the Coordination of Humanitarian Affairs (OCHA).

73. The nutrition cluster, with 35 members, implemented the approach in 14 countries. Cluster efforts supported national capacity development through a range of activities, including by strengthening information management for emergency nutrition and by providing a network for lessons learned. An independent evaluation concluded that the leadership of UNICEF in the nutrition cluster had improved coordination, had formalized relationships that were previously ad hoc and had lent authority for setting standards. The cluster was also found to have demonstrably added value for nutrition response in an independent review by Save the Children (United Kingdom).

74. The WASH cluster now includes 14 key NGOs, the Red Cross movements and five United Nations agencies, supported by institutions such as the Centers for Disease Control and Prevention, the World Water Council and key donors. The cluster coordinated responses to several large-scale emergencies, including in Bangladesh, Kenya, Madagascar, Mozambique, Pakistan and the Philippines. The cluster continued work on improved coordination, information management and hygiene promotion. Evaluations of the WASH cluster global strategy and country work, including in the Democratic Republic of the Congo and Uganda, concluded that the cluster is effective, although sometimes over-ambitious.

75. UNICEF started collaborating with WHO and other partners to establish multi-cluster training for an inter-agency pool of future health, nutrition and WASH cluster coordinators.

76. Overall, UNICEF assisted at least 68 emergency-affected countries in 2007. These included countries in Africa, Asia and Latin American and the Caribbean affected by floods, cyclones, landslides and tropical storms, and countries and areas affected by armed conflict, including Afghanistan, Central African Republic, Chad, the Democratic Republic of the Congo, Darfur, Iraq, the Occupied Palestinian Territory and Somalia. In 60 of these countries, in line with the CCCs, UNICEF supported health, nutrition and WASH-related life-saving interventions, including through:

(a) some 18.2 million insecticide-treated mosquito nets in 39 countries;

(b) emergency kits with essential drugs and supplies for 14.8 million affected people in 28 countries;

(c) nearly 200 million doses of measles vaccines in 41 countries;

(d) over 2 million doses of vaccines in response to meningitis outbreaks in parts of Africa;

(e) water trucking, treatment, collection and storage and the construction and rehabilitation of water and sanitation installations for the longer term.

77. To support nutrition in emergency and in post-conflict situations, UNICEF used a two-pronged strategy: implementation of the CCCs in crisis situations; and support to the management of severe acute malnutrition in countries with acute malnutrition rates above 10 per cent.

78. Community-based management of severe acute malnutrition is an innovative approach with the potential to treat the majority of affected children in conjunction with in-patient facilities, in emergencies and beyond. Based on new guidelines and with UNICEF support, some 25 countries are preparing or have introduced programming initiatives for addressing severe acute malnutrition. UNICEF also assisted these efforts through the provision of ready-to-use therapeutic foods (RUTFs) to 46 countries in 2007 and took a leadership role in convening government, NGO and private sector partners for the scaling-up of RUTF supply, balancing global and local production. Three local facilities have been certified by UNICEF for local production of RUTFs, and at least 10 countries are expected to have local production established or under way by end-2008.

79. In other responses, UNICEF supported a rapid nutrition assessment in cyclone-affected areas of Bangladesh, helped to distribute protein biscuits to the affected

population, and worked with national partners to disseminate a policy on infant feeding in emergencies.

80. UNICEF also participated in new global initiatives, such as the DFID-supported Network on Health and Fragile States and the Health and Nutrition Tracking Service — an independent global body that will review, validate and disseminate health and nutritional data in emergency situations. UNICEF also continued its collaboration with other United Nations agencies and NGOs on Infant Feeding in Emergencies, developing policy guidance and building capacity. One of the key outputs was the development, translation and wide dissemination of Operational Guidance on Infant Feeding in Emergencies, the effectiveness of which was demonstrated during the cyclone response in Bangladesh. A detailed emergency supply strategy for young child survival and development was also created.

B. Focus area 2: Basic education and gender equality (Goals 2 and 3)

81. Despite good progress by countries towards achieving Goals 2 and 3 — largely through sound national policies, increased public investments in education and sustained external support from partners — many challenges remain.

82. Overall, however, developing countries are making significant progress in increasing access to primary education and on gender parity in access. Primary school enrolment increased worldwide between 1999 and 2005, from 647 million to 688 million (and by 36 per cent in sub-Saharan Africa and 22 per cent in South Asia). But this is overshadowed by the continuing large numbers of out-of-school children in some regions and by high dropout and low survival rates to the last grade of primary school. The latest data from school records indicate that the number of primary-school-aged children not enrolled fell to 72 million in 2005, from an estimated 75 million in 2004. And while trends in learning achievement are far from clear, an increasing number of assessments show low and unequal learning outcomes.

83. Dropout rates and low performance reflect widespread difficulties in implementation and financing of education, evidence of which can be seen in inadequate learning materials, unsafe and unhealthy school environments, gender discrimination, lack of child-centered learning approaches, and shortages of qualified teachers, particularly those who are female. Teacher shortages are also aggravated by HIV and AIDS in some countries. Teachers are often not provided adequate training and service conditions. Poor education quality also profoundly affects prospects for gender equality and women's empowerment (Goal 3).

84. An emerging challenge in several regions is the exclusion suffered by children from disadvantaged groups and backgrounds, who often require additional and targeted measures to ensure inclusion, some beyond the field of education. While non-formal and alternative education strategies can provide learning opportunities for many children, these are often inadequately resourced. Gender discrimination underlies many forms of exclusion and creates additional disadvantages for girls and young women.

85. Even where child mortality rates have dropped, a majority of countries are not taking fully adequate measures to promote care and early education for children

below age three. The percentage of households reached by parenting or equivalent family/community care programmes remains low.

86. Progress at primary level has increased the demand for post-primary education. It is estimated that 185 million children of secondary school age are missing out on secondary education and that 127 million of these children are still attending primary school. Inequalities affecting children from rural areas and poorer families are also dramatically magnified at the secondary level. Many countries have limited capacity for the provision of education beyond the primary level.

87. While education responses in emergencies are increasingly contributing to post-crisis recovery, there are often great challenges in the longer-term rebuilding and reform of education systems. Fragile states have emerged as a key priority: in 2005, 35 fragile states accounted for 37 per cent of all out-of-school children, and the challenge in these is to find workable delivery and financing mechanisms.

1. Key result area 1: Improve children's developmental readiness to start primary school on time, especially for marginalized children.
Estimated 2007 programme assistance: $21.7 million

88. UNICEF support to Early Childhood Development (ECD) and school readiness has continued to expand in all regions, focused on three main areas: standard-setting and policy development, programme interventions and the piloting of innovative approaches.

89. An estimated 53 programme countries now have national standards for monitoring school or developmental readiness, compared to 37 in 2005. Countries are also increasingly engaged in developing ECD policy frameworks with UNICEF support and in partnership with the United Nations Educational, Scientific and Cultural Organization, NGOs and private sector institutions. UNICEF supported national ECD reviews during 2007 in Chile, China, Lao People's Democratic Republic and other countries in support of national policy and legislative reform. New policies and plans were developed by Cameroon, Guatemala and Kenya, and legislation was drafted by Mongolia, Romania and Uzbekistan.

90. Notable interventions in emergencies, including the distribution of learning and stimulation material and training of caregivers on psychosocial interventions, were supported in Chad and Iraq. ECD in emergencies is now being strengthened through the Education in Emergencies Dutch Fund. Field reports from several African countries indicate that ECD is contributing to developmental readiness. However, the quality of provision and school readiness of children is of concern.

91. In partnership with the Child to Child Trust (United Kingdom), UNICEF in 2007 launched a global initiative "Getting Ready for School: A Child-to-Child Approach" aiming at providing cost-effective school readiness interventions. Through the child-to-child approach, school children are encouraged to stimulate their younger siblings, thereby developing their early learning competencies. The approach is being piloted in six countries.

92. In further examples of the focus on marginalized children, UNICEF supported research in Georgia and Turkey on the access of marginalized children to pre-school institutions; and also assisted the implementation by the Russian Federation of a communication and advocacy strategy to promote the inclusion of HIV-positive

children in kindergarten. In Mongolia, UNICEF helped to develop alternative approaches to pre-schooling for the children of herders.

2. Key result area 2: Reduce gender and other disparities in relation to increased access, participation and completion of quality basic education. Estimated 2007 programme assistance: $159.5 million

93. UNICEF is increasingly emphasizing upstream policy work, support to sector coordination, partnership-building and capacity development — helping national partners to address disparities and to meet the education rights of marginalized and excluded children. The United Nations Girls' Education Initiative (UNGEI) is consolidating policy work in the field of gender. The School Fee Abolition Initiative and the Essential Learning Package initiative are helping countries to mobilize partners around accelerated national strategies for achieving Goal 2.

94. In 2007, some 73 programme countries had national education sector plans that included specific measures to reduce gender disparities, up from 59 in 2005. Sector plans in some 84 programme countries included specific measures to reduce other disparities, such as poverty, ethnicity and disability, up from 76 in 2005. Notable examples include the education of Roma children in Romania; of children from the Amazon region and *favelas* in Brazil; and of children with disabilities in Niger. Bangladesh has made exceptional efforts to expand access for working children.

95. In Iraq, non-formal learning opportunities are attracting great demand from communities, while in Afghanistan, the more systematic inclusion of communities in school construction and management is resulting in strong local ownership and effective protection of schools while lowering the costs of construction. In examples of South-South cooperation, successful experiences in cash transfer and social protection schemes in Latin America are being replicated in southern Africa, the Middle East and South Asia, thereby increasing the access of marginalized children to learning. Notable examples include Swaziland, where UNICEF has supported the Government in setting up social protection and school access mechanisms for orphans and other vulnerable children (OVC); and Namibia, where a UNICEF-supported grant system for schools has been successfully piloted.

96. Some 37 countries now have a formally recognized UNGEI partnership, up from 34 in 2005. In Uganda, the partnership undertook a gender audit and revision of the national gender policy. The Nigeria Girls' Education Initiative contributed to the national policy on gender in basic education. At the global level, UNGEI has focused on the mainstreaming of gender in national education plans.

97. Special legal or administrative measures were in place to reduce the costs of primary schooling for impoverished families and children in some 88 programme countries in 2007, compared to 73 in 2005. The School Fee Abolition Initiative, in which UNICEF collaborates with the World Bank and the Association for the Development of Education in Africa, has supported efforts in 23 countries. In the Democratic Republic of the Congo, work on school-fee abolition is strengthening efforts to regularize teacher salaries and the transfer of funds to schools. In Bangladesh, decentralized block grants to schools and school-level improvement plans are helping to reduce the direct costs of primary education for parents. During 2007, the Initiative also facilitated South-South exchanges through inter-country

visits as well as national engagement with the Education for All Fast Track Initiative.

98. UNICEF cooperation has also helped to reduce other costs of education to poor families. Examples include efforts in Belize, Croatia and Swaziland to provide free textbooks and in Bolivia to support the families of indigenous girls with boarding and transportation costs. In China, the public funding mechanism for rural compulsory education launched in 2006 has now reached 150 million students, particularly girls from poor families and ethnic minority children.

99. The Essential Learning Package initiative is designed to increase children's access to school and improve retention through rapid procurement of essential services and supplies. It has been endorsed by 11 countries in West and Central Africa through a series of consultations and assessments supported by UNICEF. Country approaches took the form of intersectoral pilot efforts in educationally disadvantaged areas.

100. In Liberia, UNICEF continued to support the Accelerated Learning Programme which condenses six years of primary schooling into three to enable children to make up for years lost to armed conflict. The programme is being implemented in 11 of the 15 counties in the country, and involves 53, 697 learners, approximately 46 per cent of them girls. An assessment revealed that despite fewer hours of learning, the examination performance of children completing the programme matched that of students enrolled in the conventional school system.

101. Countries are increasingly using sector-wide approaches (SWAp) to improve effectiveness in education. An estimated 26 countries were pursuing education SWAps in 2007, compared to 20 in 2005. UNICEF engaged with these in a variety of ways, most commonly supporting management mechanisms as a platform for advocacy for education reform. In Liberia and Nepal, UNICEF is contributing directly to SWAp funding pools and in some countries provides parallel funding for agreed programmes, such as for quality improvement initiatives in Bangladesh.

3. Key result area 3: Improve educational quality and increase school retention, completion and achievement rates.
Estimated 2007 programme assistance: $225.4 million

102. UNICEF work on quality education continues to be furthered mainly through the comprehensive Child-Friendly Schools (CFS) approach. Efforts are also under way to overhaul the approach and content of life skills-based education in order to strengthen its quality and empower learners.

103. By end of 2007, an estimated 62 programme countries had developed national standards for quality education, up from 43 in 2005. CFS approaches are adapted to ensure relevance to local conditions and the needs of disadvantaged groups through local planning, monitoring, capacity development and research. Some countries are extending the approach to lower-secondary levels.

104. In China, the successful piloting of child-friendly approaches in 1,000 schools had led to the adoption of national CFS standards in primary and secondary education, with UNICEF support. In Guyana, Mexico and Nicaragua, CFS initiatives are leading to greater opportunities for adolescent participation and skills development. Several countries in the Middle East and North Africa have adopted the CFS approach as a basis for education system reform. In Eastern and Southern

Africa, the "Learning Plus" initiative is a version of CFS that encourages schools and communities to address the challenges of HIV and AIDS through the integration of support services for children.

105. WASH activities in schools are helping to improve the quality of education, especially for girls. In 2007, UNICEF supported such activities in 86 countries, compared to 47 in 2005. Activities included teacher training and curriculum revision for hygiene; advocacy and policy engagement on hand-washing; standard-setting; construction of facilities; and the empowering of students to promote improved hygiene practices within their communities. The number of countries that have national plans to provide WASH education to all primary schools rose from 50 in 2005 to 69 in 2007.

106. Some 73 programme countries have integrated life skills based education (LSBE) into the primary national curriculum. LSBE is reported to be mandatory in at least 68 countries; is part of almost all national Education for All action plans; and is also increasingly built into national policies and SWAps, notably in West Africa. Most countries have adopted LSBE as a main subject starting at primary level in the context of CFS. LSBE is also an important means for reaching adolescents, including for the prevention of HIV/AIDS and gender-based violence. Although LSBE efforts have increased rapidly, with UNICEF support, they need to be complemented by access to basic services and wider awareness-raising.

107. Some 96 programme countries had developed standardized tests for measuring learning achievement by end-2007, compared to 80 in 2006. Information on UNICEF support to measuring learning achievement is not systematic. Almost all countries in South Asia and about half the countries in West and Central Africa appear to have such standardized tests, linked to the national curriculum. An East Asia Learning Achievement Study has been finalized, and a new approach to build test applications has been developed by UNICEF.

108. UNICEF continued to work closely with school feeding support programmes of the WFP to improve the learning potential of children in impoverished or emergency-affected areas, including in Ethiopia, Lao People's Democratic Republic and Sudan.

4. Key result area 4: Restore education in emergencies and post-conflict situations, and help safeguard education systems against the HIV/AIDS pandemic. Estimated 2007 programme assistance: $74.9 million

109. In 2007, UNICEF strengthened its responsiveness to the complex challenges of education in emergencies and post-crisis transition, with support from the Government of the Netherlands and other partners. UNICEF continued to promote and support major back-to-school campaigns in emergency and transitional countries, including procurement of supplies, support to preparedness planning, and improved coordination of response.

110. There was also a marked increase in 2007 in emergency preparedness and disaster risk reduction efforts in several countries. More systematic efforts are now being made to develop the education components, for example, through training for supervisors and with NGOs in the Philippines. The Government in Sri Lanka developed local and central emergency preparedness and response plans in the aftermath of the Indian Ocean tsunami, with support from UNICEF and others. In

Iran, there has been a major strengthening of emergency preparedness in the education sector, including psychosocial support and prefabricated school designs. The Maldives has also used emergency response to improve education approaches, by 'building back better' the schools damaged by the tsunami, by creating child-friendly environments and by building capacity among education staff.

111. Campaigns were carried out with UNICEF assistance in the Central African Republic; Côte d'Ivoire, where 686,000 children were newly enrolled; Central African Republic, Solomon Islands, Sri Lanka and elsewhere. In Southern Sudan, through the Girls' Education Movement and the "Go Back to School" initiative, which provided school supplies for more than 1.4 million children, primary school enrolment has dramatically increased. A fast-track training programme, piloted by the Government of Sudan in collaboration with UNICEF, has helped to create stronger teaching cadres.

112. In 2007, UNICEF supplied kits and other emergency education supplies reaching some 11.5 million children, including some 4.5 million in the Democratic Republic of the Congo and 1.3 million in Sudan, and as noted above, UNICEF continued to support WASH facilities in schools in countries in crisis and transition. The Inter-Agency Standing Committee education cluster, established in 2007, is co-led by UNICEF and the Save the Children Alliance. Considerable work was done to establish co-lead arrangements and to harness the complementary strengths of the partners. The cluster approach in education was adopted in 14 countries and good results were already apparent in the responses to floods in Mozambique and Pakistan.

C. Focus area 3: HIV and AIDS and Children (Goal 6 and Millennium Declaration)

113. In 2007, HIV/AIDS continued to be a major threat to the rights, lives and well-being of children and adolescents. However the increased interventions of stakeholders at global, regional and country levels have led to improvements in indicators for all key result areas.

114. UNICEF in 2007 took part in a major revitalization of the global Inter-Agency Task Team (IATT) on young people and HIV. Efforts were made to expand the membership and to better define the focus of the United Nations on adolescents and young people. The IATT organized a consultation on "Accelerating HIV Prevention Programming with and for Most-at-risk Adolescents", in Hanoi, which addressed obstacles to scaling up prevention. In sub-Saharan Africa, the World Bank, UNFPA and UNICEF strengthened their collaboration for promoting the integration of HIV and sexual and reproductive health and young people's participation in national planning.

115. Greater emphasis has been placed on addressing the needs of children made vulnerable by AIDS through the abolition or waiver of fees for basic services and via cash transfers to households in extreme poverty. There is evidence that the disparity in school enrolment between orphans and non-orphans has been reduced. UNICEF played a significant role in all these activities, as a lead agency or a contributing partner.

116. The Unite for Children, Unite against AIDS initiative continued to provide an important mechanism for stronger collaboration and networking on children and AIDS at all levels. Advocacy and technical cooperation were strengthened with UNAIDS and its cosponsors through the Unified Budget and Workplan; with implementing partners through the inter-agency task teams; and with National Committees for UNICEF, which raised funds for the initiative and worked with the AIDS-Free Generation Virtual Network of civil society advocates for children. UNICEF also co-hosted events such as the HIV/AIDS Implementers' Meeting that brought partners together to review issues in programme delivery.

117. The key partnership for promotion of PMTCT and paediatric treatment continues to be the IATT, which hosted the second High-Level Global Partners Forum on scaling up PMTCT. The IATT and representatives of Governments and civil society from 27 countries shared experiences in the scaling up of programmes and identified priority actions.

118. International financial commitments to fighting AIDS have grown impressively, and issues related to children and AIDS continue to gain momentum. UNAIDS, the Global Fund to Fight AIDS, Tuberculosis and Malaria, the United States President's Emergency Plan for AIDS Relief and the Bill and Melinda Gates Foundation, among others, are making major contributions towards universal access to HIV prevention, treatment, care and support.

1. Key result area 1: Reduce the number of paediatric HIV infections; increase the proportion of HIV-positive women receiving antiretrovirals; increase the proportion of children receiving treatment for HIV/AIDS.
Estimated 2007 programme assistance: $49.6 million

119. UNICEF provided support to PMTCT activities in 97 countries in 2007 compared to 90 in 2005. This included technical assistance in policy and planning, communication, training and the procurement of drugs and other supplies. UNICEF support for antiretroviral therapy provision for children and women also expanded in 2007.

120. The provision of PMTCT services continued to gain momentum worldwide. In Eastern and Southern Africa, which includes 12 of the countries with the highest numbers of pregnant women who are HIV positive, the number of such women accessing antiretrovirals for PMTCT rose from some 106,680 in 2004 to some 282,780 in 2006. The estimated proportion of such women worldwide receiving PMTCT antiretroviral drugs was estimated at 23 per cent in 2006, a percentage that is still low but improving. There are also positive trends in the delivery of antiretroviral prophylaxis to infants born to women who are HIV positive: estimated coverage rose from 7 per cent in 2004 to 17 per cent in 2006.[4]

121. Overall in 2006, 21 countries (compared with 11 in 2005) were on track to reach the United Nations General Assembly PMTCT target of 80 per cent access by 2010. Improvements in coverage are attributable to increasing political commitment; a move from a project to a programme focus; additional funding in support of national plans; and stronger partnerships, including collaboration in the IATT for prevention of HIV in pregnant women, children and their families, led by UNICEF and WHO.

122. UNICEF assisted in the development or revision of national PMTCT policies and plans during 2007 in Bangladesh, Honduras, Peru and South Africa, as well as a regional policy and national action plans in the Pacific. Advocacy and programme design were informed by the results of studies and evaluations of vertical transmission and PMTCT services sponsored by UNICEF in a number of countries.

123. Substantial increases in access to and use of PMTCT services were reported in several southern African countries in 2007, including Lesotho and Swaziland, as well as in other countries, notably the Central African Republic, Nicaragua, the Philippines and the Russian Federation. With significant new inflows of antiretrovirals, most countries in southern Africa also registered increases in the number of children receiving antiretroviral therapy in 2006. However, in most cases coverage was still well under half of all children infected with HIV.

124. UNITAID, an international drug purchase facility, has provided $20.9 million to UNICEF and WHO to support the scaling up of PMTCT services in India and seven African countries. Over two years, with UNITAID support, it is expected that over 1 million pregnant women will have been counselled and tested for HIV; that over 300,000 pregnant women who are HIV positive will receive antiretrovirals to prevent mother-to-child transmission of HIV; and that cotrimoxazole prophylaxis will be provided to nearly 130,000 HIV-exposed infants.

125. The value of antiretrovirals procured by UNICEF almost doubled, from $37 million in 2006 to nearly $66 million in 2007. Substantial price decreases have helped to increase the number of treatment packs delivered, to over 5 million in 2007. The value of HIV test kits procured by UNICEF increased from $7.3 million in 2006 to $11 million in 2007. A similar growth took place in HIV/AIDS-related diagnostic equipment, reagents and consumables, which reached over $5 million.

126. Advocacy for children in the global effort to increase treatment access is beginning to show results. Paediatric HIV treatment access increased across all regions by at least 50 per cent between 2005 and 2006. Some 127,000 children were estimated to have received treatment by end-2006, compared to around 75,000 in 2005. However access to HIV diagnosis, antiretroviral treatment and cotrimoxazole among young children and infants is still very low. This is due to a variety of constraints including lack of testing facilities for young children; perceptions of stigma and discrimination among parents and caregivers; a lack of specific knowledge of paediatric AIDS amongst health workers; weak delivery capacity and communication; and national programmes that continue to give inadequate emphasis to the needs of children.

2. Key result area 2: Increase the proportion of children orphaned or made vulnerable by HIV/AIDS receiving quality family, community and government support.
Estimated 2007 programme assistance: $42.6 million

127. The estimated number of children who have lost one or both parents to AIDS-related infections grew from about 6 million in 2000 to about 12 million in 2007. Some 34 countries have now developed specific national plans of action for OVC, an increase from 16 in 2004. Orphans 10 to 14 years old who have lost both parents are still less likely to be in school than children living with at least one parent, but the disparity between the two groups has declined in some countries. This decline is due in part to UNICEF-promoted interventions such as the abolition

of school fees and the provision of cash transfers as part of a more comprehensive social protection approach.

128. National plans of action for OVC were finalized and/or approved in several countries during 2007, including Burundi, Namibia, Rwanda and the United Republic of Tanzania. In addition, UNICEF continued to promote the availability of information for policy makers and implementation through a wide range of studies, including a national OVC situation analysis in Rwanda; an impact assessment of caregiver training in Swaziland; an analysis of the OVC cash transfer system in Ghana; and capacity assessments of NGO service providers.

129. With UNICEF support, national OVC registration systems or databases were strengthened in Botswana, Lesotho, Namibia, Sierra Leone, Swaziland and other countries. UNICEF also continued to assist efforts to strengthen community capacity to provide care and support for OVC. In Malawi and South Africa, for example, UNICEF provided assistance to help to institutionalize community child care centres. In Namibia, Swaziland and Zimbabwe, UNICEF supported training for a range of care-providing groups, including faith-based organizations and grandmothers' groups.

130. In Zimbabwe, an estimated 400,000 OVC will be reached with vital services through a six-donor $85 million pooled fund under the management of UNICEF. The Global Fund continues to make available substantial new resources for OVC programmes, while faith-based organizations, such as the Church Alliance for Orphans in Namibia, continue to be important partners in implementation. However, slow progress on projects for OVC in Uganda funded by the Global Fund threatened further disbursements: the situation is being addressed through a newly established Civil Society Fund and stronger technical support to the Government.

3. Key result area 3: Reduce adolescent risks and vulnerability to HIV/AIDS by increasing access to and use of gender-sensitive prevention information, skills and services.

Estimated 2007 programme assistance: $61.2 million

131. Comprehensive correct knowledge about HIV and AIDS is estimated to have increased by at least 10 per cent among young women in 17 countries and among young men in 5 countries. The 2007 AIDS Epidemic Update indicates that HIV prevalence among young pregnant women aged 15-24 has declined in 11 of 15 most-affected countries. These declines seem to be consistent with an increase in condom use among young people, and there is some evidence of partner reduction. However, by 2007, in only 9 low- and middle-income countries did 50 per cent or more of young people have comprehensive knowledge levels of HIV.

132. There has been a rapid increase in mandatory life skills-based education with an HIV component in national school curricula. However, more needs to be done to address stigma and discrimination related to HIV, with strategies drawing on rights-based communication for social and behavioural change.

133. HIV/AIDS education is now integrated into the national curriculum at secondary level in an estimated 65 programme countries, compared to 56 in 2005. Elsewhere, HIV/AIDS education is made available to secondary school students through optional courses and extracurricular activities.

134. UNICEF continues to contribute to the expansion of youth-friendly health service (YFHS) networks, notably in countries of Central and Eastern Europe and the Commonwealth of Independent States. Voluntary Counseling and Testing networks were expanded in African countries such as Ethiopia, Lesotho, Malawi and Mozambique. The successful 2007 HIV/AIDS campaign for young people in Timor-Leste was based on decentralized planning, peer-to-peer message dissemination, and strong local ownership. However, the establishment and expansion of YFHS within national health systems continues to be a challenge, given limited capacity in many cases.

135. YFHS-related legislation is under development or review with UNICEF support in Armenia, Belarus, Bulgaria and Turkmenistan. New national frameworks for adolescent health were finalized by Azerbaijan and The Former Yugoslav Republic of Macedonia, while Moldova and Serbia developed new national YFHS standards with UNICEF support.

136. Youth centres providing information and peer-to-peer counselling on HIV/AIDS were established and supported with UNICEF assistance in many countries, including Burundi, Occupied Palestinian Territories, Uganda and the Russian Federation, where 34 youth information centres established over the last five years are raising awareness on HIV/AIDS, sexually transmitted infections and drug use prevention.

137. UNICEF supported HIV/AIDS awareness-raising campaigns targeted to young people in all regions, with sports activities being a medium of choice. Through an agreement with key partners, the 2007 Cricket World Cup in the Caribbean also provided an opportunity for UNICEF to reach a large youth audience on HIV/AIDS issues as well as for advocacy through the Unite for Children, Unite against AIDS campaign.

138. UNICEF has teamed up with a wide range of organizations, from national sports ministries and associations, to international bodies such as the International Cricket Council and FIFA, and to prominent international sports personalities and clubs, including FCBarcelona (with a focus on South Africa and Swaziland) and Manchester United (with a focus on Malaysia and Sierra Leone).

D. Focus area 4: Child protection from violence, exploitation and abuse (Millennium Declaration; relevant human rights treaties and conventions)

1. Key result area 1: Government decisions are influenced by increased awareness of child protection rights and improved data and analysis on child protection. Estimated 2007 programme assistance: $42.3 million

139. National data on key child protection indicators are increasingly available. By 2007, an estimated 22 per cent of countries used at least some of these indicators in their current national development plans, compared to 11 per cent in 2005. Some 38 er cent of programme countries, compared to 27 per cent in 2005, have included some data from these indicators in their most recent national report to the Committee on the Rights of the Child. UNICEF has continued to support national efforts to improve child protection databases.

140. UNICEF is supporting the collection and analysis of data on child protection issues in increasing number of countries. The Multiple Indicator Cluster Survey (MICS), Demographic and Health Survey (DHS) and other national surveys have provided data on child labour, child marriage and birth registration for some 100 ountries. Twenty-nine countries had collected data on child discipline, and 27 on female genital mutilation/cutting (FGM/C), by the end of 2007.

141. Child injury databases in hospitals have enabled initial data collection on violence against children in Cambodia, Jordan, Malaysia and Mongolia. Specialized databases were also established in 2007 in countries in Africa in the areas of justice for children, birth registration and OVC. In the Central and Eastern Europe and the Commonwealth of Independent States region, research efforts focused particularly on child care, including surveys of fostering and assessments of residential institutions, and on violence against children. A preliminary study on child trafficking was carried out in Central Asia with support from the UNICEF Innocenti Research Centre.

142. In 2007, important partnerships focusing on improvement of indicators, data collection and analysis included the Inter-Agency Panel on Juvenile Justice; and collaboration with the European Union on juvenile justice initiatives in many countries in Central and Eastern Europe and the Commonwealth of Independent States.

143. UNICEF continued to provide support to the development of national mechanisms to monitor child rights violations in compliance with Security Council resolution 1612.

2. Key result area 2: Ensure effective legislative and enforcement systems and improved protection and response capacity to protect children from violence, exploitation and abuse, including exploitative child labour.
Estimated 2007 programme assistance: $77.8 million

144. In 2007, the number of States that had ratified the Optional Protocol on the sale of children, child prostitution and child pornography grew to 124 from 115 in 2006, while the number ratifying the Optional Protocol on the involvement of children in armed conflict grew to 119, compared to 110 in 2006.

145. Since the United Nations Secretary-General's Study was presented in October 2006, UNICEF has supported the dissemination, translation and global launches of the *World Report on Violence against Children*. Related publications developed by UNICEF with partners include a Handbook on "Eliminating Violence against Children" for Parliamentarians. The first special thematic session of the Human Rights Council was devoted to violence against children and the follow-up to the Study, which was also used widely by UNICEF offices to raise public awareness and as an advocacy tool with decision makers.

146. UNICEF supported programmes to strengthen institutional capacities for gender-appropriate prevention of and responses to abuse, exploitation and violence against children in two thirds of countries in East Asia and the Pacific. In Latin America and the Caribbean, all UNICEF offices supported the capacity of legislative and enforcement systems for protection. Almost all countries in the Middle East and North Africa have developed or are developing national plans addressing violence against children. In Eastern and Southern Africa, UNICEF

facilitated national reviews of legislation relating to violence against children and juvenile justice and maintained a focus on gender-based violence.

147. A coordinated approach for the abandonment of female genital mutilation/cutting (FGM/C) in one generation was finalized in 2007, outlining a human rights-based perspective and introducing an innovative social convention approach for the achievement of lasting change. MICS and other surveys showed reductions in FGM/C prevalence rates in Mali and Niger. Community mechanisms to address these practices were significantly expanded in the Horn of African and Government decrees were issued in Egypt and Eritrea to abolish the practices. UNICEF supported efforts in 22 countries in 2007 to end FGM/C, including through public awareness-raising, training of health workers and traditional leaders and data-gathering.

148. The Code of Conduct for the Protection of Children from Sexual Exploitation in Travel and Tourism was adopted or newly introduced in nine countries, and the number of signatory companies to the Code grew to over 600 in 26 countries. In Central America, a second Plan of Action to prevent commercial sexual exploitation of children and adolescents was adopted by the travel and tourism sector.

149. In addition to the global campaign launched by UNICEF and V-Day in response to sexual violence in the Democratic Republic of the Congo, UNICEF supported the development of the United Nations Comprehensive Strategy on Assistance and Support to Victims of Sexual Exploitation and Abuse by United Nations Staff and Related Personnel, adopted by the General Assembly in December 2007. Guidance for psychosocial programming on sexual violence was field-tested in Sudan.

150. Significant new legislation on trafficking and commercial sexual exploitation was adopted by the Governments of Cambodia, Indonesia, Madagascar, Malaysia and Mexico in 2007. Comprehensive action plans on child trafficking were developed with UNICEF support by Ghana, India, the Lao People's Democratic Republic, Philippines and Yemen. UNICEF also helped to strengthen cross-border monitoring and prevention mechanisms, notably in West Africa and the Mekong subregion.

151. UNICEF supported national child labour surveys in Armenia, Ghana, Madagascar, Mexico, Rwanda and Turkmenistan in 2007, and contributed to the development of national action plans for child labour eradication in Argentina, Bolivia, Malawi and the Philippines. Studies on systems for tracking child labour were strengthened, with UNICEF support, in several countries.

152. As part of the European Union accession process in The Former Yugoslav Republic of Macedonia, the Child Protection Law and the Family Law were amended, with UNICEF support, to include articles related to domestic violence and trafficking. Accession or pre-accession mechanisms are also influencing the child protection policy agendas in Albania, Croatia, Montenegro and Turkey.

3. Key result area 3: Better protection of children from the impact of armed conflict and natural disasters (in line with CCCs).
Estimated 2007 programme assistance: $43.4 million

153. In 2007, UNICEF partnered with the Government of France to define better ways to address the commitments of the Millennium Declaration and Security

Council resolution 1612. An extensive consultation process resulted in the Paris Commitments, which define measures to protect children involved in hostilities and to help them reintegrate with their families and communities. A complementary document, the Paris Principles, provides detailed guidance to practitioners.

154. To date, 66 States have endorsed the Paris Commitments, which help to strengthen advocacy for ending recruitment and for the release and reintegration of affected children, actions that often depend, however, on the conclusion of political agreements.

155. Parties to the conflict in Côte d'Ivoire were removed from the Annexes of the seventh Secretary-General's report after none of the six grave child violations was reported to have been perpetrated by the armed forces/armed groups. Consequently, Côte d'Ivoire will be removed from the future Security Council Working Group work plan. In Sri Lanka, the Mechanism prompted initial but important steps by the Government of Sri Lanka and the Liberation Tigers of the Tamil Eelam to address issues concerning children and armed conflict. In 2007, UNICEF undertook joint country visits with the Special Representative of the Secretary-General for Children and Armed Conflict to Côte d'Ivoire, Myanmar and Sudan.

156. UNICEF contributed to the social reintegration of demobilized child combatants in Angola, Central African Republic, Côte d'Ivoire, Democratic Republic of the Congo, Liberia, Nepal, Sierra Leone, Sudan and elsewhere.

157. UNICEF supported major Mine Risk Education programmes in Cambodia (reaching 2 million school children), Eritrea, Iraq, Lebanon, Sri Lanka, Sudan and other countries. In Nepal, the UNICEF-supported programme was able to quickly expand, based on earlier preparatory work. In Angola and Bosnia-Herzegovina, meanwhile, sufficient national capacity has been established to enable UNICEF to phase out support. A reduction in the number of landmine/unexploded ordnance casualties has been reported in Cambodia, the Russian Federation and Sri Lanka.

158. UNICEF continued to support the training of peacekeepers in child rights and protection, including in Central African Republic, Somalia and Sudan, where UNICEF and NGO partners trained African Union troops. In Burundi, UNICEF provided child rights training to a battalion of African Union peacekeepers before deployment and is supporting the integration of child rights into the military-training curriculum.

159. The detailed 10-year Strategic Review of the Graça Machel report, "Impact of Armed Conflict on Children", was co-convened by the Special Representative of the Secretary-General for Children and Armed Conflict and UNICEF. A special consultation process reached more than 1,000 children and young people in 18 war-affected countries. The review was presented to the United Nations General Assembly (A/62/228) on 17 October 2007. Key recommendations will help to strengthen partnership efforts to prevent and reduce the impact of conflicts on children.

160. In 2007, under UNICEF leadership, the Protection Cluster Working Group undertook an inter-agency survey of how child protection is organized and managed under the cluster approach; and started work on a rapid assessment tool on child protection in emergencies. New guidelines on mental health and psychosocial support have encouraged the integration of psychosocial interventions in broader protection programmes. Examples include the training of partners working to

prevent and respond to gender-based violence in the Syrian Arab Republic and Uganda.

4. Key result area 4: Children are better served by justice systems, which ensure greater protection for them as victims, witnesses and offenders.
Estimated 2007 programme assistance: $12.7 million

161. New or revised juvenile justice legislation was passed in Angola, the Former Yugoslav Republic of Macedonia, Madagascar and Mozambique, and drafted in 10 other countries in 2007. In Timor-Leste, an extensive consultative process involving local leaders, parents, teachers and children led to new draft legislation. Elsewhere, UNICEF helped to improve the implementation of existing legislation, including through the development of training programmes for law enforcement officials.

162. Considerable progress was also seen in all regions in the establishment of specialized courts and police units for children. Child-sensitive courts have been created in Kenya, Malawi and Mozambique. Special police units, with trained staff and child-sensitive procedures, were established in several countries.

163. Ongoing capacity-building for justice professionals is increasingly integrated into the national education system, with courses or modules in child rights/juvenile justice/protection introduced into a law school in Uzbekistan and into Police Training in Pakistan and Iran.

164. UNICEF offices have also continued to promote measures for dealing with children without resorting to judicial proceedings and deprivation of liberty, with positive results. A notable mediation and day-care project has been implemented in Tajikistan, where recidivism and juvenile offending rates have been falling as a result. This is being documented for possible replication elsewhere.

165. UNICEF is increasingly promoting a comprehensive approach to ensuring justice for children. In Papua New Guinea, for example, this approach includes a national policy, a juvenile justice act, a monitoring mechanism and capacity-building, measures which have proven effective in decreasing the number of children deprived of liberty. UNICEF is also providing growing support to access to justice for child victims and witnesses, including legal aid services for children.

166. An important step during 2007 was the design of a United Nations common approach to justice for children developed by UNICEF with key relevant agencies. This is an important contribution to enhanced United Nations coherence. Increased United Nations cooperation in justice matters is also evident in the United Nations Development Assistance Frameworks (UNDAFs), notably in Eastern and Southern Africa.

167. UNICEF is increasing advocacy efforts in several countries that have called for a decrease of the age of criminal responsibility and tougher penalties for child offenders, with new or amended legal provisions introduced, notably in Chile and Jamaica. Another key challenge in some regions is the need for comprehensive reform strategies for juvenile justice and a clear allocation of responsibilities among the judiciary, police and social services.

5. Key result area 5: Children and families identified as vulnerable are reached by key community and government services aimed at reducing their marginalization.
Estimated 2007 programme assistance: $73.7 million

168. The estimated number of programme countries with policies on the provision of alternative care for children in line with international standards increased from 36 in 2005 to 55 in 2007. UNICEF offices in 59 programme countries report a significant increase in coverage through national social welfare systems, compared to 40 in 2005. Though in some countries, private social-work provision and public-private partnerships may be increasing, greater coverage of good quality social work is urgently needed, especially for addressing disability.

169. UNICEF continued to advocate for strengthened social assistance for children, including through the training of social workers. China initiated a comprehensive situation analysis of social assistance programmes with UNICEF support. UNICEF also supported nine Eastern and Southern African countries in establishing or strengthening community-based protection mechanisms.

170. A key achievement for the Latin America region was Guatemala's ratification of the Hague Convention in respect of Inter-Country Adoption. Egypt and the Syrian Arab Republic developed assessment mechanisms for institutions and alternative care options, while several Asian countries strengthened the regulatory frameworks for child care.

171. Three global initiatives for better child care also advanced with UNICEF support: the expanding Better Care Network; a partnership initiative to identify and prioritize research on social welfare services; and the follow-up to the United Nations Convention on the Rights of Persons with Disabilities, which was adopted in 2006 and for which UNICEF has taken the lead in developing a child-friendly text and guidance materials. This forms part of a larger partnership effort to ensure advocacy and follow-up on the Convention, including Save the Children, Special Olympics, Operation Smile, whose volunteers repair childhood facial deformities, and several organizations of persons with disabilities. Specific attention is being given to reducing disparity in access to education for children with disabilities, particularly in the Americas and Caribbean.

172. UNICEF and Special Olympics International formed a partnership to advance the rights of children with intellectual disabilities on the occasion of the 2007 Special Olympics World Summer Games in Shanghai, China.

173. While many developing countries have now achieved almost universal coverage in birth registration, several still have rates of 10 per cent or below. Sub-Saharan Africa has the highest proportion of children under five who are not registered — two out of three. The largest number of unregistered children is in South Asia: nearly 23 million. Several countries have made significant recent progress, notably Bangladesh, Cambodia, the Gambia and Viet Nam. As a result of the Gambia's strategy of integrating birth registration with child health services, registration rates for children under five increased to around 52 per cent. In the Americas, UNICEF continued to support special efforts to extend registration to indigenous populations. Regional collaboration on birth registration with the Organisation of American States, Inter-American Development Bank and Plan International has resulted in a commitment from 18 Latin American governments to

achieve universal birth registration by 2015, in particular for indigenous and Afro-descendent children, and has spurred significant country-level initiatives on research, public awareness and South-South collaboration.

174. UNICEF also supported strengthening the evidence base for birth registration, at country level and through the Innocenti Research Centre.

E. Focus area 5: Policy advocacy and partnerships for children's rights

175. Through this focus area, UNICEF seeks to work with partners to strengthen capacities to design and implement cross-sectoral social and economic policies, child-focused legislative measures and budgetary allocations that enable countries to meet their obligations under the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women.

176. UNICEF has identified priority areas of support to "upstream" policy work: child poverty and disparities; social budgeting; decentralization; social security and social protection; holistic legislative reform for the two Conventions; and the impact of migration on children. These emerging emphases will be further discussed in the midterm review of the MTSP.

177. UNICEF engagement gained momentum in 2007, with thematic funding support from the Governments of Norway and Spain. More than 100 country offices have been cooperating with national partners in one or more of the above-mentioned areas, with encouraging results in all regions.

178. UNICEF also identified the need to communicate the planned results of this focus area more broadly. Progress indicators for each are expected to be articulated through the midterm review.

179. An important challenge has been staff capacity. UNICEF has made important strides through the recruitment of specialized staff and through the learning programme carried out with the University of Maastricht, which to date has included 428 staff members, as well as through training on social protection, with the University of Sussex, and on budgets and children, with Oxford Policy Management.

180. As part of its support to countries in strengthening their evidence base for decision-making affecting children, UNICEF assisted partners in the Situation Analysis of the rights of children and women in a number of countries, using new guidelines based on good practice; and continued to support various data collection processes such as the MICS and DHS. Many sector- and issue-specific surveys and studies were also sponsored.

181. UNICEF advocated and provided support for the use of the DevInfo data software package and its integration within national development indicator databases and monitoring systems. Some 102 countries are now using DevInfo as the platform to develop a national socio-economic data base for monitoring of the Millennium Development Goals. UNICEF also promoted the adoption of the DevInfo-based EmergencyInfo decision support system for rapid assessments and preparedness planning, including in Afghanistan, the Central African Republic and Pakistan.

1. Key result area 1: Collect and analyse strategic information on the situation of children and women.
Estimated 2007 programme assistance: $124.9 million

182. MICS now provide data for 21 of the 53 Goals indicators, and together with the DHS supported by the United States Agency for International Development, constitute the largest single source of such data. MICS reports and country data-sets are available at: www.childinfo.org. The findings of the third round of MICS (MICS-3), carried out in 56 countries during 2005-2007, are now widely used for national and subnational planning. Regional workshops on dissemination of findings have been completed, and final reports are being published by the participating countries.

183. In some countries, MICS-3 represents the most comprehensive and highly disaggregated social sector survey ever conducted. The data are revealing significant new information on disparities and on new issues such as attitudes towards domestic violence.

184. UNICEF has worked extensively with partners on indicator development for tracking progress, including for the new Millennium Development Goal indicators for reproductive health. UNICEF is leading the effort to develop child survival indicators for the Child Survival Countdown initiative. Considerable inter-agency work, with UNICEF support, has developed new methodologies for tracking trends in water and sanitation, maternal mortality, low birth weight and under-five mortality and has helped to build statistical capacity at country level.

185. Data are used for publishing the annual Secretary-General's Millennium Development Goals report, UNICEF flagship publications (*The State of the World's Children* report and *Progress for Children*), and the Countdown to 2015 reports. The Secretary-General's report on "Children and the Millennium Development Goals" also drew heavily on these data-sets. UNICEF offices in 69 countries in 2007, compared to 56 in 2006, reported contributing data to the national poverty reduction strategy process.

186. Systematic capacity development and effective oversight underlie the rapid growth in the international use of DevInfo. However, the regular updating of the database requires long-term commitments and resources. Another challenge is the lack of explicit agreement among stakeholders on the adoption of DevInfo in some countries.

187. Some 172 customized versions of DevInfo have now been launched, often supported jointly by UNICEF with United Nations country team partners. In the Eastern Caribbean, a partnership was formed with the CARICOM Secretariat for the roll-out of DevInfo throughout the subregion. In China, a new joint project has been launched between UNICEF, UNFPA and the National Bureau of Statistics to further extend the national database to support monitoring of the national development goals.

2. Key result area 2: Research and policy analysis on children and women.
Estimated 2007 programme assistance: $42.7 million

188. UNICEF has been increasingly involved in research and policy analysis at all levels. Some 70 UNICEF country offices have supported a national Situation Analysis of the rights of children and women in the last three years. UNICEF

supported new or substantial updates of the Situation Analysis in 28 countries in 2007. Some 80 offices supported thematic studies in 2007, of which some 69 per cent explicitly used a human rights and gender analysis framework. In Sri Lanka, for example, a study on equity and gender issues in the education SWAp will contribute to national development of strategies on inclusive education.

189. The Innocenti Research Centre continued to publish studies that analyse issues in relation to children's rights, including poverty, migration and budgeting. In 2007, the Innocenti *Report Cards* series provided a unique picture of child well-being in industrialized countries. UNICEF working papers on issues related to social and economic policy, gender equality and human rights, child poverty, and holistic legislative reform were also published.

190. A Child Poverty and Disparities study was initiated and will be carried out in 40 countries in 2008 by teams of national experts from statistical, academic and government institutions, using data from MICS, DHS and other national sources. This global initiative promoted by UNICEF aims to support Governments in increasing the effectiveness of their policies and legislation in combating child poverty and in achieving greater equity in the realization of children's rights.

191. UNICEF collaborated closely with the International Monetary Fund during 2007 in joint research on trends in fiscal decentralization and their impact on child well-being. UNICEF also supported countries, such as Papua New Guinea, in database development and the local registration of children as part of the decentralization of social services.

192. Social budgeting, as an instrument through which governments ensure and track the allocation of essential resources for children, has become one of the most active areas of UNICEF policy advocacy work. In Paraguay, UNICEF is participating in a joint project with the United Nations Development Programme (UNDP) and UNFPA to assist the Government on social budgeting, and is working together with UNDP on support to budget analysis in the Dominican Republic.

193. Increased government resources for social sector programmes benefiting children as a result of UNICEF engagement in social budgeting and child-friendly budget initiatives were seen in Chad, Ecuador and Peru. Elsewhere, UNICEF raised awareness through support to subnational partners, parliamentary budget-monitoring mechanisms or the publication of studies.

194. UNICEF continued to support Governments in the reform of national legislation in accordance with the principles of the Convention on the Rights of the Child. At the global level, UNICEF published an innovative study, "Protecting the world's children: Impact of the Convention on the Rights of the Child in diverse legal systems", detailing the challenges and opportunities for legislative review and reform in four different legal traditions.

195. In 2007, 86 per cent of UNICEF country offices indicated that they had provided significant support to recent national reporting to the Committee on the Rights of the Child, and 32 per cent had supported recent processes of national reporting to the Committee on the Elimination of Discrimination against Women. An increasing number of country programmes are directly addressing the Observations of one or both Committees (see table 1).

196. UNICEF, in close collaboration with other United Nations agencies and international financial institutions, has supported the development of research in six countries to assess the impact on children of migrating parents. This work will be extended to further countries in 2008, encompassing issues of migration, employment and young people, in cooperation with UNDP, the International Organization for Migration (IOM), the International Labour Organization and other partners.

3. **Key result area 3: Policy advocacy, dialogue and leveraging.**
Estimated 2007 programme assistance: $20 million

197. UNICEF supported poverty reduction strategy development processes in 88 countries in 2007 compared to 76 in 2005. This included advocating for children's rights, and providing data and/or direct support to Governments for the preparation of drafts. Due in some part to this engagement, in almost two thirds of countries in which UNICEF works, Poverty Reduction Strategies or equivalent national development plans now address key challenges for children, women and gender equality.

198. In some countries, including Burkina Faso, Malawi and Papua New Guinea, UNICEF has strengthened its role as an advocate for children and its ability to leverage resources for goals related to the Millennium Development Goals by contributing directly to SWAp pooled funds. Elsewhere, UNICEF influences and contributes to national SWAp formulation and implementation through non-pool membership arrangements. In 2007, UNICEF was involved in supporting SWAp processes in 42 countries, compared to 38 in 2005.

199. In the rapidly growing area of social protection, UNICEF established an inter-sectoral taskforce to identify ways to support field efforts through programme cooperation, as well as a knowledge-sharing network. Social protection initiatives are now being supported in some 33 countries and a peer-reviewed strategy is being developed for UNICEF cooperation in Eastern and Southern Africa. In Kenya, for example, a UNICEF-supported pilot cash transfer programme for OVC has reached approximately 6,000 households and is planned to extend to 22,500 households by the end of 2009. The Government, the World Bank and DFID have committed major resources for expansion of the programme, as part of the new national social protection strategy.

200. Other examples of UNICEF advocacy and demonstration efforts leading to the leveraging of significant resources in support of national social sector programmes included the allocation of new funds from the Global Fund for the tuberculosis programme in Mozambique; from the Itaú Bank in Brazil for education; and from provincial budgets for health and education in Viet Nam.

4. **Key result area 4: Enhanced participation by children and young people.**
Estimated 2007 programme assistance: $31.4 million

201. Recent advances in technology create new possibilities to bridge the digital divide, increase connectivity and increase the opportunities for young people to access information and participate in national development. Working with open source programmers from both industrialized and developing countries, government institutions and private sector companies, UNICEF has developed and adapted a mix of these technologies to increase effectiveness of development programmes. The

"Uniwiki" uses a combination of web 2.0 applications, mobile phones and digital radio technology to expand access to development information and provide families with internet access.

202. UNICEF also collaborated with Google™, One Laptop per Child, and National Public Radio to launch the Our Story Project that aims to collect and share millions of stories of young people from different parts of the world on issues that affect their daily lives. In addition, UNICEF is collaborating with Google on emergency preparedness and community mapping.

203. At the global level, UNICEF supported the participation of children and young people in several key events. During the third "Junior 8" in Germany, 74 children and young people from a range of countries presented their recommendations on global issues to G8 leaders. More than 20 children and young people also participated in the *World Fit for Children* commemorative event. Approximately 20 young people, mostly adolescent girls from marginalized communities, participated in the fifty-first session on the Commission on the Status of Women. As part of the Machel Study 10-year Strategic Review, UNICEF also facilitated the production of the report *Will you listen? Young voices from conflict zones*, based on consultation with more than 1,500 young people.

204. A pioneering study on young people's civic engagement was carried out in East Asia and the Pacific. UNICEF also supported the formulation and implementation of National Youth Policies in at least 10 countries, and supported parliaments of children and/or young people in Albania, Central African Republic, Malawi and Uzbekistan. UNICEF contributed to an increasing body of knowledge on youth participation through sponsorship of studies and research.

205. UNICEF helped to build the capacity of young people to guide their peers and to become agents of positive change in their communities through expanded support to a variety of youth-led communication programmes. Examples included Radio Mozambique's child-to-child radio programme, involving more than 500 young reporters; a community-based child journalist network programme in Honduras; and Albania's weekly youth-led television programme, *Troc* ("straight talk").

206. The estimated proportion of programme countries having institutionalized mechanisms such as national youth councils and youth parliaments for the sustained involvement of young people in national policy development increased from 14 per cent in 2005 to 23 per cent in 2007. An estimated 15 per cent of countries had such mechanisms at the local level in 2007, the most widespread example being municipal youth councils in the Americas. Some 27 per cent of programme countries include the meaningful participation of adolescents in national reporting to the Committee on the Rights of the Child; the figure is only some 7 per cent of countries for national reporting to the Committee on the Elimination of Discrimination against Women.

F. Special focus: Emergency preparedness and response

207. Guided by the Core Commitments for Children in emergencies, UNICEF responded to emergencies in more than 68 countries during 2007. Assistance included technical support for sector leadership, planning and guidance; staff deployment, financing and resource mobilization; supplies and logistics, policy

development and guidance; and security. UNICEF advocated for and secured resources for affected populations in 17 Consolidated Appeal Processes and 15 Flash Appeals. The organization continued to strengthen its human resources deployment through surge capacity and rosters. Systems development included improved supply pre-positioning and information management. making the UNICEF response more timely, predictable and reflective of best practice.

208. UNICEF continued to fulfil a critical role in humanitarian reform, which aims to improve predictability, accountability and leadership in humanitarian action. UNICEF contributed to the cluster approach, a strengthened Humanitarian Coordinator system, predictable, timely and flexible humanitarian financing and enhanced partnerships with United Nations and other actors. In addition to strengthening system-wide preparedness and technical capacity through broader partnerships in nutrition and WASH, UNICEF contributions have also been important in the clusters of telecommunications (co-lead), protection, logistics and health. UNICEF and the Save the Children Alliance were designated lead agencies on education.

209. The Central Emergency Response Fund (CERF), as a complement to the UNICEF Emergency Programme Fund (EPF), was critical to enabling effective response. In 2007, UNICEF received approximately $88 million through the CERF. UNICEF assisted in the development of policy guidance for the CERF.

210. Some $44 million was released from the EPF to 38 countries. Following the Executive Board decision in 2006 (decision 2006/16) to increase the EPF to $75 million per biennium, nearly $90 million was provided in support of 70 emergency situations in 2006-2007, more than double the amount of the previous biennium.

211. Humanitarian policies and guidelines were developed to strengthen UNICEF response, including in respect of internally displaced people, civil-military engagement, benchmarking and accountability, engagement with non-State entities and integrated peacekeeping missions. In 2007, significant progress was achieved in the implementation of the Monitoring and Reporting Mechanism, established in accordance with Security Council Resolution 1612 to monitor, report and respond to six grave violations against children in situations of armed conflict. Under the leadership of national Country Task Forces, the Mechanism was implemented in 11 countries, including additional situations arising in Chad, Myanmar, the Philippines and Uganda.

212. Emergency preparedness and response planning remains critical to ensuring that UNICEF staff is ready to respond in all humanitarian crises. A number of training and planning exercises and crisis simulations took place in some of the most disaster-prone and complex country contexts in 2007. United Nations teams in about 40 countries conducted inter-agency contingency planning in 2007. Through a partnership of Google™, UNICEF and INSTEDD (Innovative Support To Emergencies, Diseases and Disasters), efforts are being made to automate the security data display on Google Earth™ and to increase capacity for early warning database automation, management and use in UNICEF and among partners.

213. UNICEF worked closely with partners to develop a common approach to supporting Governments and communities in responding to the twin threats of avian and human influenza. UNICEF role in such a crisis would focus primarily on

communication, pre-positioning of supplies and community-based initiatives. A simulation model on Pandemic Influenza was piloted and used in 11 countries. Following the Executive Board decision of January 2007 (decision 2007/4), a Business Continuity Unit was established in New York, continuity plans were developed, and an inter-agency training programme to develop such plans was established with WFP and UNDP.

214. In Africa, Somalia experienced severe flooding followed by a major diarrhoea outbreak. Despite limited humanitarian access and attacks on humanitarian workers, a measles vaccination campaign achieved coverage of 84 per cent of children under 15 in 2006-2007. In the Darfur region of Sudan, provision of humanitarian assistance continued to be challenging due to widespread insecurity. In Chad, with support from UNICEF, some 102,000 displaced persons and another 60,000 host populations benefited from emergency water interventions. Some 800,000 people were reported to have been displaced in eastern Democratic Republic of the Congo. At least 400,000 displaced people received assistance and protection through the Rapid Response Mechanism, managed by UNICEF and OCHA and implemented by NGO partners. In response to the use of sexual violence as a weapon of war in North Kivu, V-Day and UNICEF launched a global campaign, 'Stop Raping our Greatest Resource' on behalf of United Nations Action Against Sexual Violence in Conflict. In spite of a volatile security situation throughout the northern regions of Central African Republic, UNICEF expanded its support in remote, rural areas, including through community-based schooling programmes.

215. In the Middle East, UNICEF significantly increased its humanitarian assistance in Iraq and helped to repair and strengthen WASH facilities in schools, health facilities and underserved communities in Occupied Palestinian Territory.

216. In Asia, the response to intensified conflict in parts of Sri Lanka included innovative measures such as reusable, prefabricated latrines. While Pakistan continued reconstruction work following the October 2005 earthquake, UNICEF supported the national response to severe flooding in Sindh and Balochistan provinces. Bangladesh experienced two major floods and the worst cyclone since 1991. Strong preparedness measures, including joint pre-qualification of NGO partners and pre-positioning of emergency supplies enabled an effective response. The deteriorating security situation in Afghanistan hampered programme implementation. Advocacy by the International Committee of the Red Cross, WHO, UNICEF and others for International Day of Peace facilitated the delivery of humanitarian assistance. UNICEF helped to ensure supplies of safe water and essential medicines to families by floods in the Democratic People's Republic of Korea.

217. While many countries are engaged in post-crisis recovery operations, UNICEF needs to promote more systematic emphasis on the transition to recovery. Strengthening the capacity of national partners remains a central challenge for emergency response. UNICEF continues to support the strengthening of vulnerability analysis, including in preparedness, and performance benchmarking; and remains committed to using a human rights-based approach to programming in emergencies and to strengthening its gender analysis framework. Further work to strengthen policies and practice in these areas will be done in these areas, included as part of the follow-up to the Evaluation of Gender Policy Implementation in UNICEF.

II. Supporting and cross-cutting strategies of the medium-term strategic plan

A. Human rights-based approaches to programming

218. In 2007, UNICEF human rights-based programming approaches emphasized in particular children's and youth participation, capacity-building, rights-based policy advocacy and partnerships for the rights of children and women. The approaches maintained a focus on marginalized and vulnerable people and gender concerns.

219. These approaches were especially strong in MTSP focus area 5. Initiatives such as the UNICEF-supported Malaysian Child Index, designed to assess the attainment of children's rights across Malaysia's 15 states, reflected a strong effort to promote rights-based approaches by national partners. A human rights perspective was often reflected in efforts to strengthen systems of accountability. UNICEF supported the further strengthening of Brazil's Child Rights Guarantees System, a cooperative effort by policy-making and local law enforcement agencies. In Latin America and elsewhere, National Observatories are disseminating data on child rights and monitoring public policies and expenditure, often with citizen participation. The focus on vulnerable groups was also intensified in focus areas 1 to 4, for example, in progress made on parenting programmes targeted towards marginalized families and national education plans with specific measures to reach disadvantaged groups.

220. During 2007, UNICEF contributed to finalizing guidelines for United Nations teams on the rights of indigenous peoples, to the Committee on the Rights of the Child's Day of Discussion on resource allocation, and to the elaboration of a draft General Comment on the right of the child to be heard. The Legislative Reform Initiative, described above, included a number of thematic papers on strategies for countries in harmonizing domestic legislation with provisions of the Convention on the Rights of the Child.

221. UNICEF could further improve its approach through more systematic collaboration with human rights mechanisms of the United Nations and regional institutions; through the provision of further support, where needed, to the national reporting process for the Committee on the Elimination of Discrimination against Women; and through advocacy for greater participation of children and young people in national reporting processes.

222. At the inter-agency level UNICEF continued to contribute to the United Nations Secretary-General's "Action Two" Taskforce, including through an inter-agency training of staff on the Common Learning Package on Human Rights-based Approaches.

B. Gender mainstreaming and equality

223. In gender mainstreaming, 69 per cent of country offices reported that major situation analyses or thematic studies they supported had used a human rights and gender analysis framework in 2007, up from 62 per cent in 2005. More disappointing was the slow implementation of mandatory gender reviews or gender self-assessments of UNICEF-assisted programmes, which increased from 13 per

cent of current country programmes in 2005 to 28 per cent in 2007. This will be followed up through a comprehensive response to the 2007 gender policy evaluation.

224. UNICEF focused more intently on the Convention on the Elimination of All Forms of Discrimination against Women and its reporting process. Greater use of the Committee's Observations and Conclusions were noted in programme cooperation — for example in support to research on early marriage in Azerbaijan. UNICEF supported an Asia regional conference on the linkages between that Convention and the Convention on the Rights of the Child, attended by the Chairs of both Committees, and worked with UNDP, UNFPA and the United Nations Fund for Women (UNIFEM) to promote joint reporting by United Nations country teams to the Committee on the Elimination of Discrimination against Women, at the Committee's request.

225. From an analysis of 2007 field reports it is clear that women continue to receive strong attention in cooperation in the focus area of Young Child Survival and Development and to benefit from a wide range of health, nutrition and WASH interventions supported by UNICEF. The specific focus on girls and the consideration of the role of men, fathers and boys in this focus area could, however, be strengthened. In the Basic Education and Gender Equality Focus Area, by contrast, innovative approaches to address obstacles to girls' access to learning are widespread. However, the issue of out-of-school boys requires greater attention.

226. Consideration of gender roles remains much better reflected in the focus area of HIV/AIDS and Children, an example being the use by Botswana of sex-disaggregated data to monitor beneficiaries in various PMTCT initiatives. While the Child Protection focus area shows comparatively strong attention to women, there is relatively little reflection of the differing protection challenges facing girls and boys, except in work relating to juvenile justice and child labour.

227. Work in focus Area 5 is already showing comparatively strong incorporation of gender, including in data collection and policy advocacy. For example, in Morocco, UNICEF and UNIFEM supported the piloting of gender-focused budgeting to build capacity for local level planning and budgeting processes. A gender perspective was also apparent in the child poverty studies initiated in 40 countries.

228. The main conclusions of the *Evaluation of Gender Policy Implementation in UNICEF* were shared in 2007. With funding from the Canadian International Development Agency, work began in 2007 to prepare a response, including through the initial preparation of staff training tools, the strengthening of oversight mechanisms for new country programme documents, and an updating of guidance on support to national reporting to the Committee on the Elimination of All Forms of Discrimination against Women. Building on the evaluation, UNICEF will markedly strengthen its contribution to gender equality results through country cooperation and inter-country advocacy and analysis.

229. UNICEF further intensified its work with United Nations partners during 2007, for example by chairing a new United Nations Development Group (UNDG) Gender Task Team group on Gender in pilot countries for United Nations coherence. Together with UNDP, UNFPA and UNIFEM, UNICEF assisted in preparing a paper for the UNDP/UNFPA Executive Board on how the four agencies will ensure complementarity of gender equality provisions of their strategic plans.

C. Results-based planning and management

230. UNICEF made further progress in developing its results-based planning and management (RBM) systems and practices, particularly through the strengthening of the MTSP itself as a results-based planning framework. The 2007 *Assessing Results Management in UNICEF*, a study commissioned by the Government of Denmark in association with five other Governments, reported that "the current MTSP includes measurable outcomes that provide strategic direction to country offices and Key Performance Indicators which track UNICEF's performance across a series of financial, operational and human resource outputs. Furthermore, UNICEF has developed systems to monitor these indicators at a country and global level."

231. The report further notes that "... a factor influencing UNICEF's RBM system is UNICEF's funding relationship with donors. The high share of resources contributed directly to projects at a country level creates distinct reporting requirements and accountability to donors outside of corporate RBM systems examined in this report". The report made specific recommendations for both UNICEF and funding partners, to which UNICEF has provided a detailed response.

232. Several of these recommendations will be addressed through training programmes, such as "Managerial Accountability for Results", which was piloted in 2007 for programme and operations staff and is currently being assessed. UNICEF has continued to strengthen its Business Information system, including the Key Performance Indicators that are now collected and reviewed online for reviewing performance at all levels. The use of partner assessment surveys as a tool in RBM was piloted on a small scale in four countries and will be expanded.

233. UNDG, with UNICEF support, initiated an in-depth review of the systemic issues that affect the use of RBM among United Nations country teams. The study will conclude in mid-2008 by proposing methods for harmonizing and strengthening the RBM approaches of the United Nations joint programming process at country level.

234. The RBM approach has now been extended to the UNICEF biennial support budget. The sixteen functions and indicator framework described in Executive Board paper E/ICEF/2008/AB/L.1 will further strengthen the results focus of the organization.

235. MTSPInfo was introduced in 2006 as the corporate database for monitoring UNICEF performance and indicators for the MTSP and the Millennium Development Goals and is being further developed. The Data Companion to the Annual Report of the Executive Director to the Executive Board is now a regular reporting mechanism.

236. An organizational improvement project on Performance Management was introduced in late 2007 (see below) to strengthen the UNICEF RBM approach by improving and consolidating tools, oversight mechanisms and key indicators for assessing efficiency and results. The initiative will also introduce performance management elements for staff, linked to wider performance. Agreed elements of this project will be introduced incrementally, starting in 2008.

D. Generation and use of knowledge, including good practices and lessons learned

237. UNICEF continued to strengthen its systems for documenting lessons learned and good practices, focusing on knowledge generated by country programmes of cooperation. Drawing on field reports, a database and website were developed in 2007 to store, share and facilitate documentation, using improved criteria and templates for managing lessons learned. An internal publication series will present good practices on MTSP focus areas.

238. Knowledge arising from midterm reviews, evaluations, situation analyses, quantitative surveys and other studies is being more systematically disseminated through web-based and interactive tools and print media. These cover all MTSP focus areas and cross-cutting areas, including policy, migration and South-South cooperation. The Evaluation and Research Database will undergo improvements in 2008, including further meta-analyses of evaluations for specific themes. Trends in the evaluation function will be further discussed in specific reporting to the Executive Board.

239. New approaches to sharing information and stimulating dialogue were also explored. The "Eyes on the World" weblog provided a forum for discussion on a wide range of emerging issues in development and United Nations coherence. Two open dialogues were organized in 2007 with United Nations missions and other agencies: "Eyes on the budget as a human rights instrument", sharing UNICEF experiences on social budgeting; and "Eyes on the South as a Knowledge Hub", profiling examples of ideas from the South that have been adopted in the North.

240. The newly consolidated global capacity of UNICEF for knowledge management has led to the development of "communities of practice" models for knowledge-sharing and the improvement of other information management platforms. A comprehensive global knowledge management strategy will be formulated in 2008. Related initiatives are being pursued by field offices to facilitate information-sharing and analytic capacity-building within and among countries and through partnerships with national agencies.

III. Organizational performance

241. UNICEF continued to work on key improvement initiatives identified as essential for organizational effectiveness. A number of studies and evaluations — including of the supply function, human resources function, gender, and the organizational review — have helped to inform this process. These initiatives aim to improve operational effectiveness in converting resources into results and to make UNICEF more nimble in responding to the changing external environment:

(a) The **Accountability Initiative** aims to improve the current accountability mechanisms of UNICEF and to put in place a comprehensive, results-based system of accountability at all levels;

(b) The **Enterprise Risk Management Initiative** will develop a consistent and strategic framework for managing the challenges of high-risk and uncertain political, physical, programme and operational environments;

(c) The **Organizational Performance Management Initiative** is developing new and strengthening existing tools and mechanisms, as outlined above;

(d) The **Business Process Improvement Initiative** will build on the Business Process Review in identifying, streamlining, simplifying and improving business processes throughout UNICEF;

(e) A key component of the above initiative is the development and roll-out of the **One Enterprise Resource Planning** which will integrate current information technology business systems into a single integrated platform;

(f) The **Talent and Leadership Development and Management Initiative** is developing new recruitment, performance management and capacity development strategies and tools to identify new and emerging talent, and further strengthen existing capacities;

(g) The **Dynamic Programming Approaches Initiative** is reviewing current approaches and practices to enable a more flexible and adaptive programming approach and more strategic and coherent organizational approaches in programme cooperation;

(h) The **Knowledge and Content Management Initiative** will develop and implement an organization-wide strategy in this area, thereby strengthening the position of UNICEF as a global knowledge leader for children;

(i) The development of an enhanced **Internal Communications System** will improve communication among staff to support increased engagement in securing results for children;

(j) The **Global Strategy for Collaborative Relationships and Partnerships** is being developed, outlining the UNICEF results-based approach to working with others. This approach links with advocacy, programme delivery, mobilization and leveraging of resources, and refining the UNICEF strategic approach to capitalizing on the power of collaboration to leverage sustained results for children.

242. Meanwhile, there has been steady progress towards the achievement of planned MTSP targets on organizational performance. Programme management indicators generally show an improving trend (see table 1). The proportion of country offices with updated emergency preparedness/response plans increased to 87 per cent in 2007. The timeliness of donor reporting also continued to improve. An independent review of the quality of 20 country programme documents submitted to the Executive Board in 2007 indicated that 90 per cent fully or adequately met "SMART" criteria, as did the percentage of programme evaluations rated satisfactory or better, based on United Nations standards.

Table 1: Key programme management performance indicators

Indicator	2004	2005	2006	2007	MTSP target for 2009
% country offices with annually updated emergency preparedness/response plan	81%	85%	88%	87%	100%
% new country programme documents referring to Observations of Committee on the Rights of the Child and/or Committee on the Elimination of Discrimination against Women	77%	89%	91%	93%	100%
% donor reports submitted on time	62%	71%	74%	75%	85%
Governments assisted by UNICEF to produce a plan to address the availability of essential commodities for children in the country	n.a.	14%	20%	16%	75% of LDCs
Policy and Procedure Manual with annually updated developments in United Nations reform, joint programming and emergency preparedness/response	Achieved				Annual updates
Countries where a Gender Review and/or Self-Assessment been conducted of the current UNICEF-assisted Country Programme	n.a.	13%	27%	28%	2007: 30% 2009: 70%
% of new country programme documents independently assessed as adequate or better using SMART criteria	n.a.	n.a.	100%[a]	90%[b]	2007: 90% 2009: 100%
% of programme funds expended on annual work plans which are jointly financially supported by one or more other United Nations agencies	n.a.	n.a.	3.3%	5.3%	
% of total income that is thematic funding	8%	21%	11%	9.7%	15%
% programme evaluations rated satisfactory or better, based on United Nations standards[c]	79%	78%	84%	n.a	80%
% evaluations with a formal management response[d]		79%	80%	80%	75%

n.a. = not available.

[a] Reflects an adjustment to the earlier-reported figure based on further work.

[b] The drop to 90% is due to the application of more rigorous criteria that give further weight to right-based and gender considerations.

[c] Data include adjustments to reflect evaluations that were received in the later part of 2006. Data for 2007 will be available by mid-2008.

[d] Includes MTSP evaluations, evaluations conducted by the Evaluation Office and other corporate evaluations. Data refer to evaluations with a recorded management response or written commitment to recommended actions or a revised and approved policy that addresses key issues raised in the evaluation.

243. The support UNICEF provides to countries to assess the availability of essential commodities for children, and where necessary, to plan to address shortages, has yet to gain momentum. The majority of countries are also yet to undertake a gender review and/or self-assessment of the UNICEF-assisted country programme. And despite the very active and widespread role of UNICEF in UNDAFs, joint programmes are yet to emerge as a major modality for delivery of assistance as measured by the percentage of total expenditures.

244. Key management indicators also show a generally positive trend. For the third year in a row, the ratio of management/ administration/ programme support costs to total regular other resources was better than the MTSP target of 18.7 per cent (see table 2). Cash Assistance to Governments outstanding for more than nine months was at 1 per cent at the end of 2007, compared to the MTSP target of 5 per cent. While the proportion of audit observations closed by the middle of the following year was at 56 per cent in June of 2007, it had improved to 90 per cent by December, compared to 87 per cent in December 2006. UNICEF also implemented a Financial Disclosure Programme in 2007 and established an Ethics Office.

245. UNICEF continued to participate strongly in United Nations system-wide financial management initiatives, including development of the first results-based biennial support budget (BSB) for 2008-2009, harmonization of financial regulations and rules, and preparations towards the adoption of International Public Sector Accounting Standards by 2010.

246. Trends in human resource management were less encouraging. The proportion of recruitment for regular posts completed within 90 days increased from 17 per cent in 2005 to 44 per cent in 2006, but dropped to 33 per cent in 2007. This decline was due to several factors, including a temporary freeze on key posts under recruitment in anticipation of the 2008-2009 BSB, reclassification and re-profiling of some vacant positions against the priorities of the new BSB, and delays associated with posts funded through other resources due to uncertain funding. Similar factors accounted for a drop in the proportion of recruitment for emergency posts completed within 90 days. However, this covers fixed-term appointments only; it does not reflect the development of UNICEF surge capacity for emergencies, including internal redeployment of staff, external recruitment of consultants and standby arrangements with partners. Indeed, over 150 staff were deployed to 56 countries in 2007 while recruitment for fixed-term appointments proceeded.

247. Estimated spending on learning and staff development increased from $5.4 million in 2006 to $7.3 million in 2007. There was substantial further progress in enhancing the skills of staff in rights-based policy analysis and evidence-based advocacy, including through the partnership with the University of Maastricht, which provided learning for 181 management staff in 2007. MTSP targets for staff participation in basic and excellence learning programmes were exceeded. The target on leadership and management learning programmes was not achieved because of difficulties with scheduling.

248. A generic cluster-led learning package for staff working in emergencies was developed in collaboration with OCHA. This will form the backbone of sector-specific cluster leadership training to be developed in 2008 for United Nations agencies. UNICEF also played an important role in the new United Nations

e-learning courses on the Millennium Development Goals and on joint programming.

249. Trends in supply operations continued to be positive, with UNICEF procuring routine vaccines for some 30 per cent of the world's children and antiretroviral medicines for 56 countries. UNICEF continues to be one of the largest buyers of mosquito nets and oral rehydration salts. UNICEF supported measles campaigns in 51 countries, delivering more than 176 million doses of vaccines, while 61 GAVI-supported countries received vaccines and injection safety materials through UNICEF. Overall, UNICEF procured approximately $1.4 billion worth of commodities for children in 2007, an increase of 16 per cent over 2006.

250. UNICEF is on track to achieve the MTSP targets on Supply. In 2007, the value of all procurement services transactions, including those for GAVI, totaled $677 million. A total of 71 per cent of supply orders through the UNICEF Supply Division were delivered at port of entry at or within agreed upon target arrival date in 2007; the figure for 2006 was 57 per cent. Rapid response supply orders delivered within 48 hours maintained the 2006 level of 86 per cent. Progress continued towards ISO certification (standards for management systems), expected in 2008, including the training of staff and review of processes.

251. UNICEF also advocated for closer collaboration in procurement-related activities among humanitarian aid agencies. Very close ties with the United Nations Joint Logistics Centre facilitated support to responses in complex emergencies. Collaborative procurement arrangements were strengthened, particularly with UNDP/Inter-Agency Procurement Services Organization, United Nations Office for Project Services, WFP, the United Nations Procurement Service and the Office of the United Nations High Commissioner for Refugees.

252. Further progress was made in 2007 in strengthening information technology systems, including the successful implementation of SAP-HR and Payroll in four regional offices. The development of SAP e-recruitment was also completed. UNICEF shared experiences from its Enterprise Resource Planning implementation with other agencies, including the United Nations Secretariat, WFP and IOM.

253. In the humanitarian sphere, UNICEF continued to build the collaborative framework, procedures and infrastructure necessary for effective sector leadership in data communications. Achievements included building the telecommunication infrastructure to support other agencies in emergencies; identification of activation and response procedures; activation of clusters for the Democratic Republic of the Congo, Lebanon, Mozambique and Pakistan emergencies; and training and service-level agreements.

Table 2: Key operations management performance indicators

Indicator	2004	2005	2006	2007	MTSP target for 2009
Management/Administration/Programme Support costs to total regular resources and other resources	19.7%	15.3%	14.3%	14.1%	18.7% as from 2007
% of allocated regular resources for programme expended at end of year	91%	93%	93%	97%	95%
% outstanding cash assistance to government of more than nine months	8%	3%	2%	1%	5%
% of audit observations closed by 1 July of following year	82%	66%	65%	56%	90%
Headquarters supply achievement of ISO 9000 in contracting and QA services			Process initiated	Process initiated	
Value of country procurement services (millions of United States dollars)	$323	$413	$577	$677	$500
% orders delivered at port of entry at or within agreed target arrival dates*	74%	64%	57%	71%	80%
% rapid response orders shipped within 48 hours of sales order release*	98%	85%	86%	86%	80%
% recruitment for regular posts completed within 90 days	n.a.	17%	44%	33%	100%
% recruitment for emergency posts completed within 90 days**	n.a.	55%	60%	43%	To be determined
% performance assessment reports signed by all 3 parties by February of following year	n.a.	n.a	51%	62%	100%
% of staff who spent more than 10 days on planned learning	n.a.	36%	34%	33%	50%
Number of staff successfully completing Learning Programmes at following levels:					
- Basic		n.a.	6,049	2310	400/yr
- Programme Excellence		n.a.	653	670	300/yr
- Leadership and Management		n.a.	52	31	150/yr

n.a. = not available; data were not collected on this indicator in previous years.

* The parameters for the calculation was tightened in 2006 to remove a two week 'grace period'; hence the apparent decline.

** Fixed-term posts only; does not reflect the use of UNICEF surge capacity to respond to emergencies.

IV. Income, expenditure and resource mobilization

Income

254. Total income to UNICEF increased by 8 per cent, from $2,781 million in 2006 to $3,013 million in 2007, and exceeded the financial plan for 2007 by $13 million. This is attributable to increased contributions to other resources (regular); and regular resources. Other resources (emergency) decreased.

Table 3: UNICEF income by resource type and source for 2006 and 2007

(In millions of United States dollars)

Regular resources							
Government	538	466	527	72	15%	11	2%
Private sector	392	400	396	(8)	(2%)	(4)	(1%)
Other	176	190	130	(14)	(7%)	46	35%
Total - regular resources	1,106	1,056	1,053	50	5%	53	5%
	37%	38%					
Other resources – regular							
Government	905	814	823	91	11%	82	10%
Private sector	415	260	352	155	60%	63	18%
Inter-organizational arrangements	59	50	97	9	18%	(38)	(39%)
Subtotal	1,379	1,124	1,272	255	23%	107	8%
Other resources – emergency							
Government	292	334	371	(42)	(12%)	(79)	(21%)
Private sector	61	139	148	(78)	(56%)	(87)	(59%)
Inter-organizational arrangements	175	128	156	47	37%	19	12%
Subtotal	528	601	675	(73)	(12%)	(147)	(22%)
Total - other resources	1,907	1,725	1,947	182	11%	(40)	(2%)
	63%	62%					

Table 4: UNICEF income by source for 2006 and 2007

(In millions of United States dollars)

Government	1,735	1,614	1,721	121	8%	14	1%
Private sector / non government	868	799	896	69	9%	(28)	(3%)
Inter-organizational arrangements	234	178	253	56	31%	(19)	(8%)
Other	176	190	130	(14)	(7%)	46	35%

255. Income to regular resources increased by 5 per cent to $1,106 million, and exceeded the plan by $53 million, or 5 per cent, in 2007. Some 36 per cent of the increase in regular resources from Governments was due to the appreciation in currencies of payment. Contributions to other resources increased by 11 per cent to $1,907 million but still fell behind the plan by $40 million, or 2 per cent. As a result, regular resources accounted for 37 per cent of total income to UNICEF in 2007, a slight drop from 38 per cent in 2006, and other resources accounted for 63 per cent of total income in 2007, an increase from 62 per cent in 2006.

256. Contributions to other resources (regular) from the private sector increased by 60 per cent, to $415 million. The National Committees for UNICEF were the largest contributors. Significant contribution increases were also received from the GAVI Alliance and the United Nations Foundation.

257. Other income to regular resources exceeded the planned level by 35 per cent, or $46 million, due to the good performance of the investment portfolio for a second consecutive year. This was achieved through a combination of varied investment instruments and higher interest rates, as well as favorable foreign exchange markets.

258. Receipts and disbursements of $781 million and $800 million have been administered and accounted for under various trust funds, including procurement services, in 2007.

Total expenditure

259. Total expenditure increased by 19 per cent, from $2,357 million in 2006 to $2,798 million in 2007. Expenditure on programme assistance increased by $398 million (19 per cent) to $2,517 million, and combined expenditure on programme support ($156 million), management and administration ($84 million), and including centrally shared security costs ($10 million), increased by $32 million (15 per cent) to $250 million.

Table 5: UNICEF expenditure for 2006 and 2007

(In millions of United States dollars)

Programme assistance	2,517	2,119	2,502	398	19%	15	1%
Net programme support and management and administration	250	218	302	32	15%	(52)	(17%)
Subtotal	2,767	2,337	2,804	430	18%	(37)	(1%)
Write-offs	15	7	7	8	114%	8	114%
Support cost reimbursement	16	13	13	3	23%	3	23%

Programme assistance

260. The following tables summarize UNICEF direct programme assistance (net of programme support) in 2007 by MTSP focus area and geographical region, disaggregated by funding source:

Table 6: Direct programme assistance by focus area and region

(In millions of United States dollars)	EOR	ROR	RR	Total
Young Child Survival and Development	416.5	574.3	327.2	1,318.0
Basic Education and Gender Equality	153.2	247.1	111.6	511.9
HIV-AIDS and Children	11.2	87.1	62.6	161.0
Child Protection: Preventing and Responding to Violence, Exploitation and Abuse	79.5	103.3	81.6	264.3
Policy Advocacy and Partnerships for Children's Rights	35.4	62.7	135.4	233.6
Other	-2.8	6.0	25.0	28.3
Total	**693.0**	**1,080.5**	**743.5**	**2,517.0**

In %	EOR	ROR	RR	Total
Young Child Survival and Development	60.1%	53.1%	44.0%	52.4%
Basic Education and Gender Equality	22.1%	22.9%	15.0%	20.3%
HIV-AIDS and Children	1.6%	8.1%	8.4%	6.4%
Child Protection: Preventing and Responding to Violence, Exploitation and Abuse	11.5%	9.6%	11.0%	10.5%
Policy Advocacy and Partnerships for Children's Rights	5.1%	5.8%	18.2%	9.3%
Other	-0.4%	0.6%	3.4%	1.1%
Total	**100.0%**	**100.0%**	**100.0%**	**100.0%**

261. The estimated shares of the focus areas in total programme assistance in 2007 remained very close to the MTSP projected levels for Young Child Survival and Development (52.4 per cent compared to 52 per cent) and Child Protection (10 per cent compared to 9 per cent). The overall share of Basic Education and Gender Equality (20.3 per cent compared to 18 per cent) and of Policy Advocacy and Partnerships for Children's Rights (9.3 per cent compared to 6 per cent) were above the projected levels. The share of HIV/AIDS and Children (6.4 per cent compared to 14 per cent) was well below the projected level.

262. The relatively low assistance share for HIV/AIDS and Children is believed to be due to substantial integration of some activities related to HIV/AIDS under other focus areas, including school-based HIV prevention, life-skills education, care of OVC, treatments delivered through health services and policy analysis. Further factors include a relative shift to results areas that are less financially intensive, particularly the promotion of policies for OVC, and very limited funding for HIV/AIDS emergency interventions.

Table 7: UNICEF programme assistance by geographical region, 2007

(In millions United States dollars)	EOR	ROR	RR	Total
CEE/CIS	3.3	64.9	24.6	92.9
Asia	250.2	333.9	175.8	759.9
Sub-Saharan Africa[a]	386.7	487.8	443.3	1,317.8
Interregional	10.4	54.4	28.3	93.2
Middle East and North Africa	32.1	57.1	39.3	128.6
Americas and the Caribbean	10.2	82.4	32.0	124.7
Total	**693.0**	**1,080.5**	**743.5**	**2,517.0**

[a] Expenditure assistance for Sudan and Djibouti is included under sub-Saharan Africa.

In %	EOR	ROR	RR	Total
CEE/CIS	0.5%	6.0%	3.3%	3.7%
Asia	36.1%	30.9%	23.6%	30.2%
Sub-Saharan Africa[a]	55.8%	45.1%	59.6%	52.4%
Interregional	1.5%	5.0%	3.8%	3.7%
Middle East and North Africa	4.6%	5.3%	5.3%	5.1%
Americas and the Caribbean	1.5%	7.6%	4.3%	5.0%
Total	**100.0%**	**100.0%**	**100.0%**	**100.0%**

[a] Expenditure assistance for Sudan and Djibouti is included under sub-Saharan Africa.

263. The share of programme assistance in sub-Saharan Africa, at 52.4 per cent, continued to exceed the target of 50 per cent, and the share of regular resource expenditures was 59.6 per cent. Sub-Saharan Africa received 83 per cent of Set-Aside resources. A further 30.2 per cent of programme assistance supported programmes in Asia. The share of programme assistance in Least Developed Countries also exceeded 50 per cent (see annex).

Resource mobilization

264. A total of 102 Governments contributed to UNICEF resources in 2007. Total income from the public sector, including Governments, intergovernmental organizations and inter-organizational arrangements, amounted to $1,969 million, representing an increase of 10 per cent over 2006. From these donors, $538 million was received for regular resources; $964 million for other resources (regular); and $468 million in other resources (emergency). In all, contributions from government and inter-governmental sources increased by 8 per cent over 2006 levels, while contributions from inter-organizational arrangements, also originating from Government donors, increased by 31 per cent.

265. Private sector contributions, comprising income from private sector fund-raising and contributions from NGOs, totaled $868 million in 2007, reflecting an increase of 9 over 2006. While regular resources contributions declined slightly (by 2 per cent), from $400 million to $392 million, the contributions to other resources increased by 19 per cent, from $399 million to $476 million.

266. Despite a considerable increase in contributions to regular resources by Governments of 16 per cent, and an overall growth in regular resources of 5 per cent, the proportion of regular resources to total resources, at 37 per cent, fell slightly from 2006 levels (38 per cent). This was due to the faster growth of other

resources (11 per cent) in 2007, and in particular non-emergency contributions (23 per cent). Predictable and growing core resources are important for UNICEF to fulfil its mandate and achieve results for children by maintaining its global outreach.

Figure 1: Top 20 donors to UNICEF regular resources in 2007

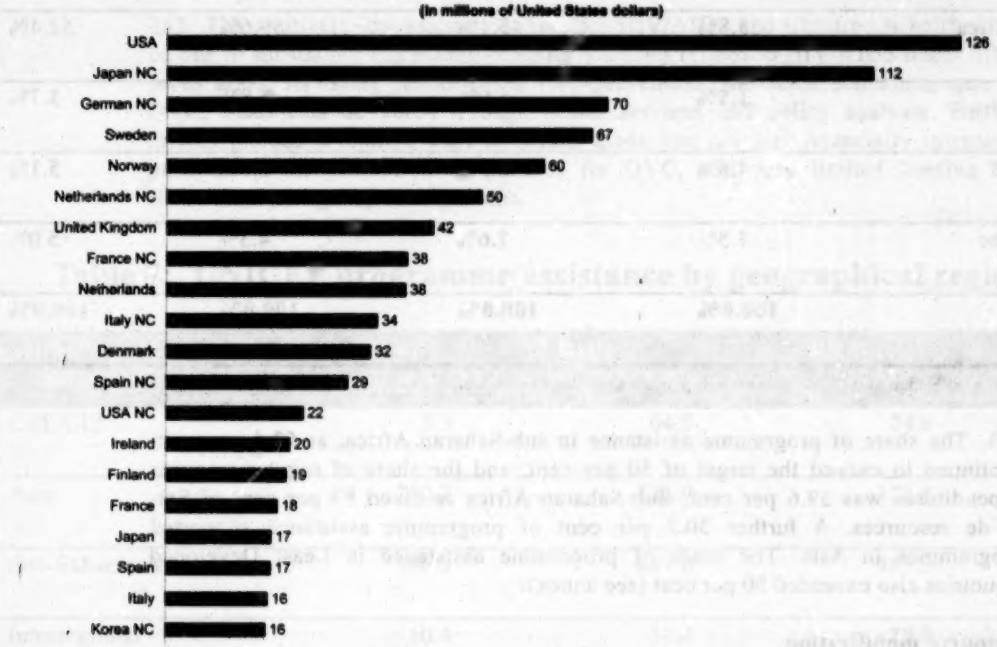
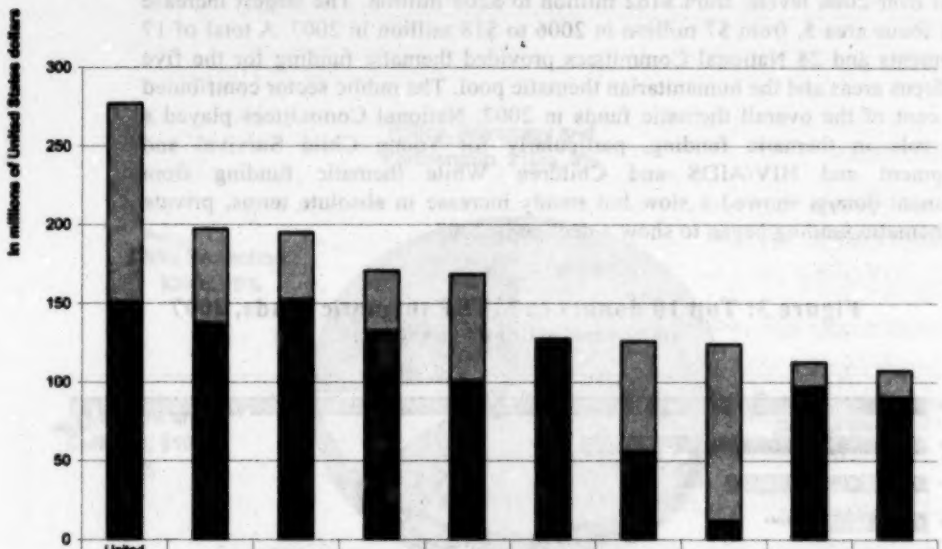


Figure 2: Top 10 donors to UNICEF, 2007



	United States of America	Norway	The United Kingdom	Netherlands	Sweden	EC/ECHO	Germany NC	Japan NC	Canada	Japan
RR	125.7	59.9	42.3	38.0	67.5	0.0	69.9	112.0	15.5	16.7
ORR	90.3	119.4	127.6	105.6	86.3	89.9	43.2	10.7	83.3	74.9
ORE	61.0	18.3	25.2	27.4	35.0	37.8	13.1	1.7	13.8	15.6

Does not include $84 million CERF and other pooled funds

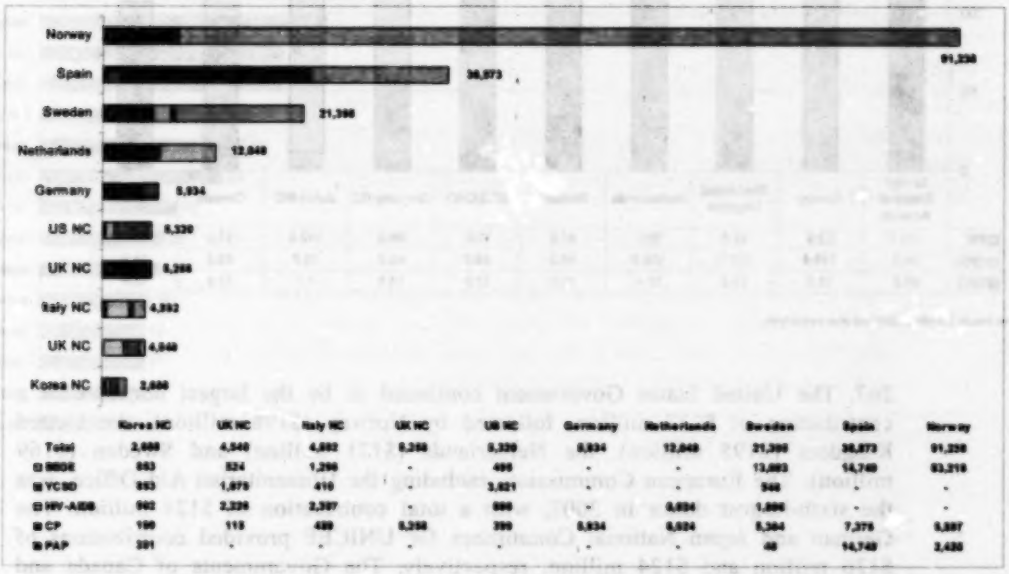
267. The United States Government continued to be the largest donor, with a contribution of $277 million, followed by Norway ($198 million), the United Kingdom ($195 million), the Netherlands ($171 million) and Sweden ($169 million). The European Commission, including the Humanitarian Aid Office, was the sixth-largest donor in 2007, with a total contribution of $128 million. The German and Japan National Committees for UNICEF provided contributions of $126 million and $124 million, respectively. The Governments of Canada and Japan, which provided $113 million and $107 million, respectively, are also among the top 10 donors to UNICEF.

268. The year 2007 was an important year for UNICEF public-private partnerships, particularly in the area of health. Among the major contributors to UNICEF were the United Nations Foundation ($71.8 million), GAVI ($47.8 million), the Canadian Micronutrient Initiative ($10.3 million), the Global Fund to Fight AIDS, Tuberculosis and Malaria ($12.3 million) and Rotary International ($7.5 million). In addition to providing financial resources, these partnerships contributed to leveraging further funding support.

269. Thematic funds directly support the achievement of the key results of the MTSP by enabling longer-term planning and sustainability as well as savings in transaction costs for both UNICEF and donors. Administrative processing of thematic contributions is less burdensome and allows greater concentration on programming for results. Since the inception of thematic funds in 2003, UNICEF

has received $604 million in non-humanitarian, and $774 million in humanitarian, thematic funds. In 2007 thematic funding for the five focus areas increased by 29 per cent over 2006 levels, from $162 million to $209 million. The largest increase was for focus area 5, from $7 million in 2006 to $18 million in 2007. A total of 17 Governments and 28 National Committees provided thematic funding for the five MTSP focus areas and the humanitarian thematic pool. The public sector contributed 76 per cent of the overall thematic funds in 2007. National Committees played a crucial role in thematic funding, particularly for Young Child Survival and Development and HIV/AIDS and Children. While thematic funding from Government donors showed a slow but steady increase in absolute terms, private sector thematic funding began to show a decline in 2007.

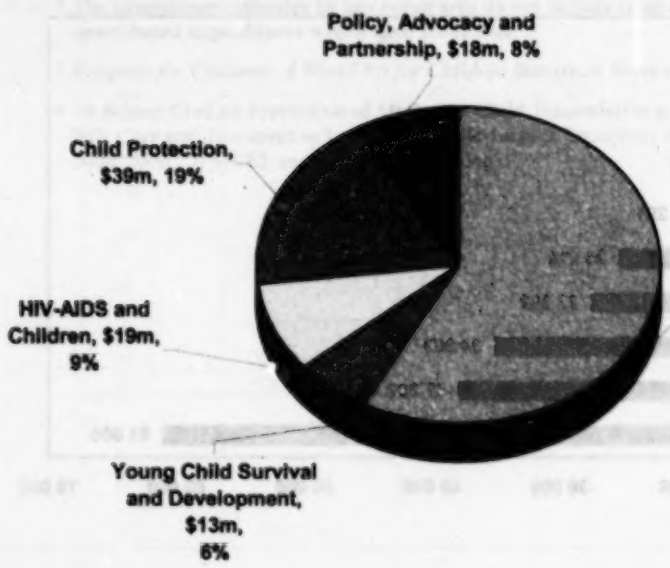
Figure 3: Top 10 donors to MTSP thematic funds, 2007
(In thousands of United States dollars)



	Korea NC	UK NC	Italy NC	UK NC	US NC	Germany	Netherlands	Sweden	Spain	Norway
Total	2,688	4,540	4,892	5,266	5,330	5,834	12,840	21,390	38,873	91,250
BEGE	863	524	1,296	-	499	-	-	13,893	14,749	83,210
YCSD	863	1,975	410	-	3,831	-	-	948	-	-
HIV-AIDS	962	2,329	2,397	-	999	-	5,834	1,896	-	-
CP	190	113	489	5,266	399	5,834	5,834	5,364	7,375	5,887
PAP	391	-	-	-	-	-	-	48	14,749	2,430

BEGE = Basic education and Gender equality
YCSD = Young child survival and development
CP = Child protection
PAP = Policy advocacy and partnership for children's rights

Figure 4: Thematic funding for MTSP focus areas, 2007

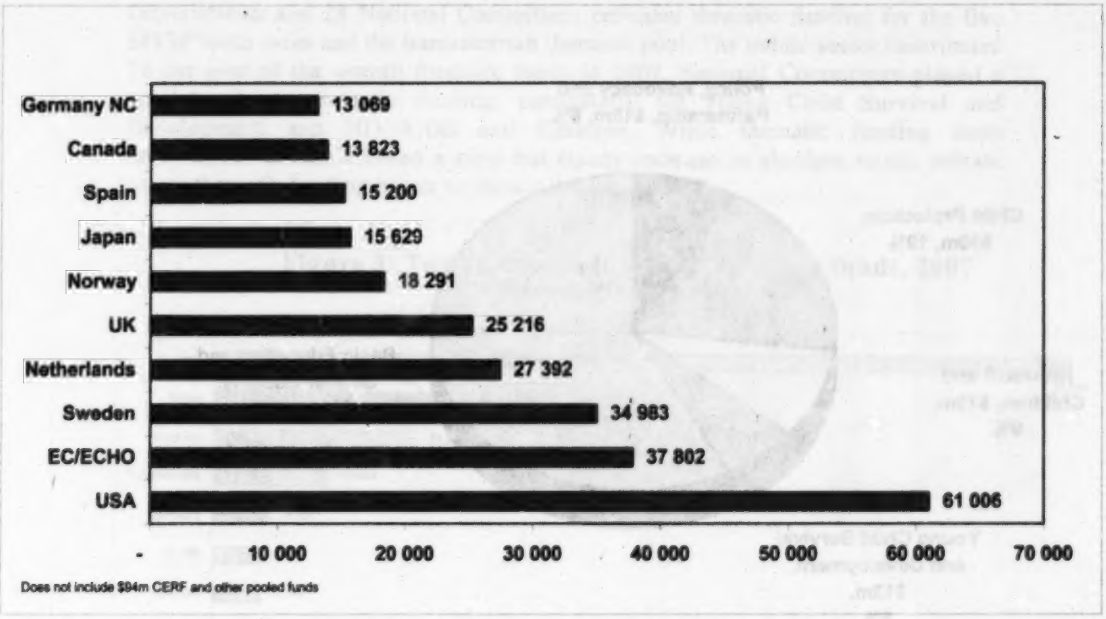

Policy, Advocacy and Partnership, $18m, 8%
Child Protection, $39m, 19%
HIV-AIDS and Children, $19m, 9%
Young Child Survival and Development, $13m, 6%
Basic Education and Gender Equality, $121m, 58%

270. UNICEF income for humanitarian assistance amounted to $529 million, which reflects a decrease of 12 per cent from the 2006 level of $600 million. This trend reflects the change in the nature of emergencies as well as in the demand for humanitarian assistance in 2007; the total amount sought decreased by 29 per cent from 2006 levels.

271. In 2007, UNICEF responded to 64 appeals and requests for humanitarian assistance including 17 Consolidated Appeal Processes (CAPs), 15 Flash Appeals, and 32 other crises. Overall, UNICEF requested $920 million in 2007 for humanitarian interventions to ensure the protection of vulnerable women and children. The CAPs were relatively well funded in 2007, receiving 64 per cent of their financing needs, while Flash Appeals attracted the greatest donor attention, receiving 65 per cent of the requirements. The 'other' crises were funded the least, at some 33 per cent of estimated needs.

Figure 5: Top 10 donors of humanitarian funds, 2007

(In thousands of United States dollars)



272. There is increasing diversity in funding mechanisms for emergencies. These aim to encourage better coordination, more transparency and predictability of humanitarian response. The expanded CERF and the Common Humanitarian Funds had their second year of operation in 2007 and both were reviewed. At $94 million, CERF was the largest source of Government other resources (emergency). Other multi-donor funds include pools for the Central African Republic, Democratic Republic of the Congo, Ethiopia, Somalia and Sudan. The Sudan Common Humanitarian Fund, with $32.8 million, and the Democratic Republic of the Congo Pooled Funds, with $29.1 million, were the largest country-based pooled funding mechanisms. These pools vary in their procedures, and UNICEF is working with partners to streamline transaction costs.

273. While 2007 saw an increase in pooled funding sources, thematic humanitarian funding decreased. Out of the total 2007 emergency funds, 16 per cent ($84 million) was received as thematic funding, down from 24 per cent in 2006. Thematic humanitarian funding reflects donors' commitment to Good Humanitarian Donorship and enables UNICEF to respond more effectively to humanitarian crises, based on overall priorities. UNICEF is grateful for donors' support, particularly for quality, un-earmarked funding for humanitarian interventions, and will continue to advocate for thematic funding.

Notes

[1] Sally Mc. Gregor at., (2007) Child Development in Developing Countries: Development Potential in the First 5 years for Children in Developing Countries, *Lancet*, 369, 60-70.; and Walker, S.P., Wachs, T.D., Meeks, G. J., and the International Child Development Steering Group Child development (2007). Risk factors for adverse outcomes in developing countries, Lancet, 369, 145-157.

[2] The expenditure estimates by key result area do not include relatively minor cost-recovery and unattributed expenditures within each focus area.

[3] *Progress for Children: A World Fit for Children Statistical Review*, UNICEF (December 2007)

[4] "A Report Card on Prevention of Mother-to-Child Transmission of HIV/AIDS and Paediatric HIV Care and Treatment in Low- and Middle-Income Countries, Progress on scaling up 2004-2006", UNICEF and WHO (forthcoming).

Annex

Programme expenditure in 2007 for countries classified according to gross national income and under-five mortality rates [a/]

	Child population in 2006 (In millions)	Child population (Percentage of total)	Number [b/] of countries	Expenditure (In millions of US dollars)	Expenditure (Percentage)	Cents per child (US cents)
Country grouping based on 2006 GNI						
Low income, Total	1,074	54%	56	1,763	66%	164
(Low income, excluding India)	*629*	*31%*	*53*	*1,653*	*62%*	*263*
Lower middle income	694	35%	49	586	22%	84
(Lower middle income, excluding China)	*346*	*17%*	*48*	*538*	*21%*	*161*
Upper middle income	229	11%	25	115	4%	50
Total for countries	1,998	100%	130	2,463	92%	123
Total for global and other regional funds				210	8%	
Grand Total	1,998	100%	130	2,673	100%	
Country grouping based on 2006 U5MR						
Very high U5MR	202	10%	21	719	27%	356
High U5MR, Total	766	38%	32	1,000	37%	131
(High U5MR, excluding India)	*320*	*16%*	*34*	*890*	*33%*	*278*
Middle U5MR, Total	831	42%	47	569	21%	68
(Middle U5MR, excluding China)	*483*	*24%*	*37*	*541*	*20%*	*112*
Low U5MR	199	10%	26	175	7%	88 [c/]
Total for countries	1,998	100%	126	2,463	92%	123
Total for global and other regional funds				210	8%	
Grand Total	1,998		126	2,673	100%	
(of which LDCs)	395	20%	46	1,362	51%	345

a/ Low income = GNI per capita of $905 or less.
Lower middle income = GNI per capita between $906 and $3,595.
Upper middle income = GNI per capita between $3,596 and $11,115.
Very high U5MR = over 140 under-five deaths per 1,000 live births.
High U5MR = 71-140 under-five deaths per 1,000 live births.
Middle U5MR = 21-70 under-five deaths per 1,000 live births.
Low U5MR = less than 21 under-five deaths per 1,000 live births.
LDCs = least developed countries.

b/ Pacific, Caribbean and CEE/CIS/Baltic States multi-country programmes were counted as one each except countries in emergency situations within the multi-country programme with separate expenditure and available indicators.

c/ Higher cents per child reflect expenditure in countries with small child populations and also in three countries/areas experiencing emergency situations, which account for over 50 per cent of the total expenditure incurred.

United Nations E/ICEF/2008/11

Economic and Social Council

Distr.: General
19 May 2008

Original: English

For discussion

United Nations Children's Fund
Executive Board
Annual session 2008
3-5 June 2008
Item 7 of the provisional agenda**

Report on implementation of the Ending Child Hunger and Undernutrition Initiative*

Summary

This report responds to Executive Board decision 2007/9 adopted at the 2007 annual session of the Executive Board. In this decision, the Board requested the submission of a report on the implementation of the Ending Child Hunger and Undernutrition Initiative at its annual session of 2008, in order for the Board to review the role and involvement of UNICEF.

Given the food price increases, the focus of the initiative is being adjusted to provide more effective and relevant support to national activities addressing the needs of the most vulnerable populations.

I. Background

1. Undernutrition among children under the age of five years has declined from 32 per cent in 1990 to 27 per cent in 2006. However, latest estimates show that 143 million children in that age group continue to suffer from undernutrition. Some 51 developing countries, representing nearly half of the countries for which data is available, are not making sufficient progress towards the 'hunger target' of Millennium Development Goal 1 as measured by the prevalence of underweight in children under five years of age. Some 18 of these countries are making no progress at all or are retrogressing in terms of this indicator. The Ending Child Hunger and Undernutrition Initiative was conceived as a catalytic effort to mobilize collaboration to promote intensified, sustained actions to address this challenge, based on interventions of proven effectiveness.

* This document was delayed because of the need for consultation.
** E/ICEF/2008/9.

08-34694 (E) 230508

2. The situation of inadequate global progress towards the Millennium Development Goal hunger target threatens the achievement of all the Millennium Development Goals, and is of major and immediate concern. According to *The Lancet* (January 2008), maternal and child undernutrition is a contributing cause of more than a third of child deaths and some 10 per cent of the global disease burden. Poor growth occurring before birth or during early childhood can lead to irreversible damage, including shorter adult height, lower learning achievement, reduced adult income, and decreased birthweight among offspring. While nutrition interventions of proven effectiveness need to be more widely available to children and families, long-term investments in empowering women, in education and in reducing inequities need to work in tandem with known technical solutions. These nutrition interventions are most effective in the period from pregnancy to two years of age. Although undernutrition occurs widely, four fifths of all undernourished children live in just 20 countries, with the largest number of these children living in South Asia. Intensified nutrition action in these priority countries will help to accelerate the achievement of health-related Millennium Development Goals and make major contributions to the Goals relating to poverty and hunger reduction, education and gender equality.

3. The UNICEF Executive Board reviewed the document "Ending Child Hunger and Undernutrition Initiative" (E/ICEF/2007/11) at the annual session of 2007, taking into consideration decision 2007/EB.1/3 of the Executive Board of the World Food Programme (WFP). In decision 2007/9, the UNICEF Executive Board approved the participation of UNICEF in the Ending Child Hunger and Undernutrition Initiative, including its work plan and secretariat, as described in document E/ICEF/2007/11. The Board urged the Executive Director to ensure that the medium-term strategic plan (MTSP) of UNICEF, including its cross-cutting and support strategies, continues to provide the guiding strategic and financial framework for all partnerships in which UNICEF participates, including for efforts to end child hunger and undernutrition. The Board approved the allocation of up to $1 million of core resources, in the absence of other resources, to support funding of a joint secretariat for this initiative.

II. Update on Progress

4. In line with the Executive Board's suggestions and feedback, ECHUI is a partnership effort that aims to help countries in strengthening their existing integrated national programmes, where these are currently inadequate, and in accelerating their progress towards achieving Millennium Development Goal 1 target 2. As described below, an analysis of the effectiveness of existing national programmes has begun in a number of countries as a first step towards accelerating nationally owned solutions supported by partnerships among the United Nations, civil society and key private sector actors. These partnerships support integrated, country-level operations for implementing, at scale, specific evidence-based interventions.

5. Intensified action is of major and immediate concern, especially in the light of the recent extraordinary rise in food prices and related nutrition insecurity. The rise in food prices has already caused civil unrest in parts of the world and is having a deleterious effect on children and families — and on the often already inadequate health systems and service delivery capacities on which they depend. The rise in

food prices is also likely to negatively impact the HIV/AIDS situation worldwide. Particularly in food-importing countries and communities, the escalating food prices will make the fight against child hunger, undernutrition and family poverty even more of an uphill struggle if additional actions are not taken to mitigate the impact.

6. Within the context of the current rise in food prices around the world, national and local monitoring of food and nutrition security among vulnerable children, women and families is being supported by UNICEF and partners. Where needed, efforts are and will be made with partners to increase food availability and accessibility as well as to advocate for and support additional measures to ameliorate the situation.

7. ECHUI will provide a framework and focus for strengthening collaborative relationships to assist countries in the management and response to rising food prices and their effects on the most vulnerable.

8. A specific progress update is provided on the following three points:

(a) Formation and work of the ECHUI partnerships and secretariat and related allocation of resources;

(b) Proposed package of effective interventions;

(c) Involvement of national Governments.

9. **Formation and work of partnerships and secretariat and resource allocation**. Since the first review of ECHUI by the Executive Board at its first regular session in 2007, efforts have centred on securing support and engagement from a range of relevant partners and on country-level involvement. In addition to a number of United Nations agencies, the partners include Helen Keller International, Save the Children (USA), Save the Children (UK), World Vision, Washington University, Boston Consultancy Group, and others.

10. Meanwhile, a joint secretariat has been formed at WFP in Rome with one senior staff member each from the World Health Organization (WHO), WFP and UNICEF. A total of $300,000 from UNICEF resources has been allocated to support the functioning of the secretariat, which has been working to coordinate strategy development and inter-agency interventions.

11. **Effective interventions**. A recent article on maternal and child undernutrition that appeared in a leading medical journal, *The Lancet*[1], was used to update the set of interventions for the framework of the accelerated effort. This scientific update, combined with an inter-agency and inter-sectoral review, confirmed that the partners in ECHUI should focus their country support and country-level and global advocacy efforts on the following four critical areas:

(a) increased coverage of early initiation and continued exclusive breastfeeding;

(b) improving micronutrient intakes of mothers and children as well as, where needed, dietary intake, especially during pregnancy and the first two years of life;

[1] C. Victoria *et al.*, "Maternal and Child Undernutrition: consequences for adult health and human capital", *The Lancet*, Vol. 371, Issue 9609 (26 January 2008): 340-57.

(c) preventing and treating severe acute malnutrition through the expanded use of ready-to-use therapeutic foods, such as Plumpy'nut®;

(d) reducing rates of diarrhoea by improving hygiene and parasite control.

12. Also anticipated are other key complementary actions, such as immunization, the provision of insecticide-treated mosquito nets and malaria prevention to pregnant mothers, as well as poverty alleviation interventions such as conditional cash transfers.

13. The initiative complements and strengthens the work of national and international partners to support Accelerated Child Survival and Development interventions. It will rely upon and seek to strengthen existing national planning, coordination, communication, delivery and monitoring mechanisms, without promoting new ones. For UNICEF specifically, support to and involvement in the initiative and its partnerships are taking place within the framework of the Young Child Survival and Development focus area of the existing MTSP, consistent with the UNICEF health and nutrition strategy in support of the MTSP.

14. **Country involvement**. The country capacity analysis and follow-up planning is being supported in partnership with WFP, WHO, the Food and Agriculture Organization of the United Nations and a private sector company, the Boston Consulting Group (BCG). Categories of countries have been identified using characteristics such as magnitude of the undernutrition problem; identified opportunities and barriers to scaling-up; as well as capacities, resources and commitment.

15. In 2008, inter-agency country analyses are taking place with BCG support in the Lao People's Democratic Republic, Mauritania, and a third country — most likely Rwanda — with a WFP 'Purchase for Progress' pilot initiative. The experience of BCG has been strengthened by preliminary studies in Mauritania and Niger, conducted in cooperation with the respective Governments and UNICEF and WFP country offices. The studies confirmed that child hunger and undernutrition are so far sub-optimally addressed in the poverty reduction strategy paper, the Common Country Assessments and the United Nations Development Assistance Framework (UNDAF). This analysis also contributed to further enhancing cooperation between UNICEF and WFP in supporting national efforts by Niger to address high levels of wasting and undernutrition. One position within each of the Resident Coordinator's Offices in Lao People's Democratic Republic and Mauritania is being supported as part of BCG's assistance.

16. WHO is the lead partner in providing support for a similar analysis of country capacity and readiness to scale up critical nutrition actions in eight additional countries: Burkina Faso, Cambodia, Ghana, Guatemala, Madagascar, Peru, South Africa and Viet Nam. The initiative is building on the results of these studies. Assessments have already taken place in collaboration with national partners in Burkina Faso, Ghana and Madagascar.

17. Meanwhile, before the start of the initiative, considerable scaling-up of effective interventions had already been achieved by national partners in Ethiopia, Kenya, Uganda and the northern Sahelian countries, as well as in several Latin American countries, and by states in India. Additional countries, such as Malawi, have made more recent progress. United Nations support for these country activities has generally been planned and managed through the UNDAF process, with strong

collaboration in support of national partners between UNICEF and WFP as well as other United Nations and non-governmental agencies.

18. The findings of the country analyses will be used to scale up national nutrition programmes in addition to strengthening the UNDAF process for expanded action. The collaborative inter-sectoral experience gained from these existing country activities will inform partnership support to other countries that have the greatest burdens of childhood hunger and undernutrition and that face major negative effects from the rise in food prices.

19. As an example of these approaches to partnership support, in Ethiopia, within the UNDAF framework, UNICEF and WFP have assisted country authorities in the implementation of the national Enhanced Outreach Strategy and Targeted Supplementary Food activities. A combination of critical health and nutrition interventions to benefit large numbers of children — including vitamin A supplements, de-worming tablets, nutritional screening and immunizations — are provided through Child Health Days. Of some 11.1 million children reached in 2007, the nutritional status of about 6 million was assessed, and of these children, 440,000 were found acutely malnourished and were referred to a targeted supplementary food programme supported by WFP. In 2008 UNICEF, together with the World Bank, began to provide support to scaling-up the ECHUI package in an initial 40 out of 150 target districts/*woredas* under the community-based nutrition component in order to prevent child malnutrition.

20. As previously reported, in five countries of the Sahelian sub-region (Burkina Faso, Chad, Mali, Mauritania and Niger), where young child undernutrition ranges between some 32 per cent and 44 per cent, members of the United Nations Country Teams are working closely with non-governmental organizations and regional and international financing partners in support of national policies and programmes to address the challenge. With the involvement of United Nations Resident Coordinators, WHO, FAO and UNDP, UNICEF and WFP as lead agencies are providing support for the treatment and care of undernourished children and to a range of preventive measures, including infant and young child feeding, micronutrient supplementation, household food security, vaccinations, malaria and diarrhoeal disease control, as well as the promotion of hand-washing.

III. Next steps, monitoring and evaluation

21. UNICEF will continue to be one of the lead partners in the initiative, while WFP, as part of its partnership contribution, is expected to continue to host the inter-agency team. As mentioned above, given the food price increases, the focus of the initiative will be adjusted as needed to provide more proactive support to national monitoring of and responses to the impact of the food crisis in vulnerable countries and communities. Children are at higher risk of being negatively affected in this situation due to their increased need of a high-quality, diversified diet for their growth and development. Pregnant or lactating women are particularly at risk due to their increased nutritional needs. The rise in food prices may therefore not only slow down the progress towards achieving health- and nutrition-related goals but also contribute to reversing positive trends in some countries and localities, depending on factors such as presence of social safety nets, the size of the urban population, and base levels of malnutrition and food security.